Return to Play (RTP): Concussion Care Protocol

General Information:
A student’s best chance of full recovery from a concussion involves slow reintegration of cognitive and physical stimuli after a traumatic brain injury. It is best to listen to one’s symptoms and avoid activities that exacerbate the symptoms.

Cognitive stimulation includes, but is not limited to:
**Academics**: reading, writing, studying, keyboarding, test-taking, labs, visual and applied arts, extracurriculars.
**Loud, bright environments**: chorus, orchestra, band, acting, tech theatre, cafeteria
**Physical exertion**: PE, dance, marching band, extracurriculars, athletics, strength or cardiovascular conditioning
**Screen time**: computers, whiteboards, in class/homework movies and videos
**Recreational screen time**: cell phone use, texting, social media, video, TV, online viewing
**Driving**.

These stimuli must be limited and regulated for a period of time during recovery from a concussion.

It is recommended that this protocol is shared with the student’s health care provider during the initial visit.

Stages of Concussion Recovery and Extracurricular Participation:
1. Emphasize physical and cognitive rest depending on student’s symptomatology; (Options for modified daily class schedule)
2. Limited school work (Options for modified daily class schedule)
3. Moderate academic work
4. Full Curricular (Academic) Participation and begin Return to Play protocol for Extracurricular (Activity and Athletic) Participation

Points of Emphasis:
● It is important to note that the recovery from a concussion is a very individualized process. Caution must be taken not to compare students with concussions as they progress through the recovery process.
● The information below is provided to teachers/support staff/sponsors/coaches, parents/guardians/guardians, and students as a guide to assist with concussion recovery.
● For the concussion care protocol to be initiated, the student must first be evaluated by a healthcare provider and documentation of that visit must be given to the school nurse. An emergency room/acute care note is only temporary and will retain the student at Stage 1 until the student is seen by the health care provider within one week.
● The student’s missed academic work will be reviewed and extra time to complete will be granted, in conjunction with the healthcare provider’s recommendations, counselor/case manager, and school nurse guidance.
● As the student’s recovery progresses through Stage 1-3, teachers should identify essential academic work in each subject and collaborate with the department supervisors, as needed, to determine potential reduction in coursework. Limited work can promote healing, but lessening stimuli and reducing anxiety related to the perceived volume of work will be required once a student is medically cleared to resume a full academic load.
● The teacher has the option of assigning the student a grade of incomplete for the progress report/quarter grade, final exam, and/or semester grade.
● High school students are often very busy. Many students are enrolled in advanced classes and have one or more extracurricular activities. Therefore, prioritizing activities in the student’s learning plan and reducing overall demands becomes especially important in order to reduce concussion symptoms.
● If the student remains in any stage or recovery longer than anticipated, the school nurse will request that the parent/guardian consult with the healthcare provider.
● It is important upon return to school that the student report to the school nurse that day (and athletic trainer if school athlete and in season) to monitor symptoms and determine progression to the next stage within the concussion care protocol.
● For in-season student-athletes: Report daily to the athletic trainer. Written clearance from the health care provider to the trainer before the student is allowed to watch, practice, or compete.
● For in-season Activities: Report to your sponsor. Written clearance from the health care provider to the school nurse is required before the student is allowed to attend meetings or activities

**District 113 Athletics Return-To-Play Protocol (in-season athletes)**

● Written clearance from the health care provider is required to begin physical activity.
● The IHSA Return-To-Play Protocol includes five phases of activity with increasing intensity. Each phase will take place 24 hours following the previous step. If symptoms return during any phase, a 24-hour period of rest is required before repeating that phase:
  ■ Step 1: Light aerobic activity
  ■ Step 2: Increased aerobic activity
  ■ Step 3: Agility training
  ■ Step 4: Non-contact activity related to specific sport/skill
  ■ Step 5: Full contact activity
  ■ Step 6: Return to competition
For additional questions, please contact the School Nurse, Activities Director or Athletic Trainer

### Deerfield High School:

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