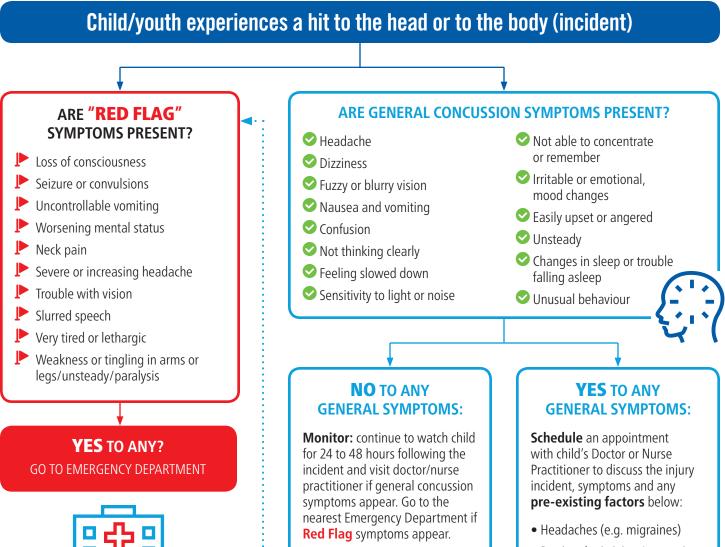
PARENT'S PATHWAY Page 1 of 5 FOR CHILD AND YOUTH CONCUSSION

FOR USE BY PARENTS AND CAREGIVERS | APPROPRIATE FOR AGES 5 TO 18 YEARS Every child/youth suspected of a concussion should be seen by a medical doctor or nurse practitioner



- Previous brain injury/concussion
- Attention Deficit Hyperactivity Disorder
- Learning disabilities
- Mental illness



PUBLIC HEALTH

1-877-464-9675 TTY: 1-866-512-6228 york.ca/concussion

APPENDIX C S38 Sept. 2019

MANAGING YOUR CHILD'S CONCUSSION RECOVERY Page 2 of 5



Rest is most important for the first 24 to 48 hours. Following the 24 hour period of rest, encourage light activity only as tolerated.

Get informed about concussion injury recovery:

- Check for symptom changes regularly (at least once a day)
- Child will need physical and mental rest with regular naps and sleep
- Limit activities that require concentration like reading, computer use, video gaming, playing musical instruments and driving if applicable

Tell the child's school if a concussion is suspected or diagnosed. School boards have concussion policies to manage students with a concussion. Coaches, trainers and activity leaders outside of school also need to be informed. **Return** to Doctor/Nurse Practitioner if general concussion symptoms last more than one to two weeks to reassess and monitor for any signs of ongoing, persistent symptoms. Ask for a referral to a concussion specialist if symptoms last more than four weeks.

Return to learn and play: Children and youth should not return to play or activities until they have successfully returned to school.

If child has pre-existing factor(s):

Be aware that recovery may take longer — weeks to months

Watch for anxiety, depression and risky behaviour and, where necessary, immediately seek referral for mental health services

Monitor closely and take child to a concussion specialist if symptoms last for more than four weeks

BRAIN INJURY MANAGEMENT SUPPORT SERVICES IN YORK REGION

Emergency Room Departments

TRIAGE, TREATMENT, ADMITTANCE AND REFERRAL

Mackenzie Health: 10 Trench Street, Richmond Hill. Tel: 905-883-1212

Mackenzie Health Urgent Care Centre: 9401 Jane Street, Vaughan Tel: 905-832-4554

Markham-Stouffville Hospital: 381 Church Street, Markham. Tel: 905-472-7000

Southlake Regional Health Centre: 596 Davis Drive, Newmarket. Tel: 905-895-4521

Finding Concussion Programs

Holland Bloorview Kids Rehabilitation Hospital Concussion Clinical Services (18 years and under) hollandbloorview.ca/programsandservices/Concussioncentre/ Concussionservices

Canadian Academy of Sport and Exercise Medicine (Sport-related concussion) casem-acmse.org/physician-directory/find-a-sport-medicine-doctor

Return to Learn/Return to Play

SCHOOL BOARD POLICIES AND RESOURCES FOR MANAGING STUDENTS WITH CONCUSSION

York Region District School Board <u>yrdsb.ca/Parents/Pages/concussion-Management.aspx</u>

York Catholic District School Board Policy 212 – Concussions <u>drive.google.com/file/d/0B0-HXDw45sKAVkNhX1hsVVFGVVE/view</u>

Resources

York Region Public Health



Injury prevention resources, including concussion york.ca/concussion

Holland Bloorview Kids: Concussion Handbook for Parents and Kids

Resource to help with concussion management and recovery hollandbloorview.ca/programsandservices/Concussioncentre/ Concussioneducation/Handbook

Concussion Awareness Training Tool

Online course cattonline.com

Ontario Government Concussion Web Portal

Resources for students, parents, educators and coaches <u>ontario.ca/concussions</u>

Parachute

Concussion resources parachutecanada.org/concussion

Ontario Brain Injury Association (OBIA)

Support for people living with the effects of acquired brain injury (ABI) <u>obia.ca</u>

York Catholic District School Board Concussion Management Student Medical Clearance following Suspected Concussion

(Student Name)

has demonstrated signs of a concussion and

according to York Catholic District School Board *Policy 212: Concussions* and related *Procedure* must be seen by a physician or Nurse Practitioner prior to returning to play and to establish the need for return to learn accommodations.

Stage 1: Identification

RESULTS OF INITIAL MEDICAL EXAMINATION

- NO concussion has been diagnosed (Student resumes normal learning and physical activity routines)
- Concussion HAS been diagnosed and therefore the student must begin medically supervised, individualized and gradual return to learn/return to play Procedures (below).

Stage 2A: Management of Return to Learn (Limitations)

Stage 2B: Management of Return to Play (Limitations)

(Physician/Nurse Practitioner Name - Please Print)

(Physician/Nurse Practitioner Signature)

(Date)

Students should be symptom free for 24 hours to progress to the next stage, see pg.3

(Attach any documentation received from the Physician/Nurse Practitioner to this form)

Copy to Student's O.S.R.

Stage 3 Clearance: Light

Aerobic Exercise and Sport-Specific Exercise

IParent/Guar	dian of			
(Parent/Guardian or Student over 18 Name)	(Student Name)			
confirm that (s)he continues to be symptom free and Aerobic	s able to progress to Stage 3 Clearance: Light			
Exercise (rehabilitation stage #2) and Sport-Specific Exercise (rehabilitation stage #3) at school.				
(Parent/Guardian or Student over 18 Signature)	(Date)			
Stage 4 Clearance: Non-Contact Training				
I, Parent/Guardian or Student over 18 Name)	uardian of(Student Name)			
confirm that (s)he continues to be symptom free and is able to progress to Stage 4 Clearance: Non-Contact Training (<i>rehabilitation stage #4</i>) at school.				
(Parent/Guardian or Student over 18 Signature)	(Date)			
Stage 5 Clearance: Full Contact Practice				
I, have ex (Physician/Nurse Practitioner Signature)	amined(Student Name)			
(Physicial/Nulse Placilionel Signalule)	(Student Name)			
and confirm (s)he continues to be symptom free and Practice,	s able to transition to Stage 5- Full Contact			
followed by Stage 6- Normal Game Play, provided (s)he remains symptom free.				
(Physician/Nurse Practitioner Signature)	(Date)			
(Attach any documentation received from the Physician/Nurse Practitioner to this form)				

APPENDIX C S38 Sept. 2019 Page 4 of 5

Copy to Student's O.S.R

APPENDIX C S38 Sept. 2019 Page 5 of 5

Students should be symptom free for 24 hours to progress to the next stage. RETURN TO LEARN PROTOCOL

	RETURN TO LEARN PRO	TOCOL
Recovery Stage	Activity Level	Objective of Stage
1. Complete physical and cognitive rest until medical clearance	No schoolStrict limits on technology usageRest	Return to school with academic accommodations
2. Return to school with academic accommodations	 Continue technology limits Avoid heavy backpacks No tests, PE, band or chorus, shop/tech Rest at home 	Continue academic accommodations
3. Continue academic accommodations	 Attend school full time, if possible Increase workload gradually Monitor symptoms Incorporate light aerobic activity Rest at home 	Full recovery to academics
4. Full recovery to academics	 Attend school full time Self- advocate in school Resume normal activities Resume sports following graduated Return to Play 	
Rehabilitation Stage	Functional Exercise at each Stage	Objective of Stage
1. No Activity	Complete physical and cognitive rest	Recovery
2. Light Aerobic Exercise	Walking, swimming or stationary cycling low intensity; no resistance training	Increase heart rate
3 Sport-Specific	Skating drills in bockey running	Add movement

		uaning	
3.	Sport-Specific Exercise	Skating drills in hockey, running drills in soccer, no head impact activities	Add movement
4.	Non-Contact Training	Progression to more complex training drills, may start progressive resistance training	Exercise, coordination and cognitive load
5.	Full Contact Practice	Following medical clearance, participate in normal training activities	Restore confidence and assess functional skills by coaching staff
6.	Return to Play	Normal Game Play	