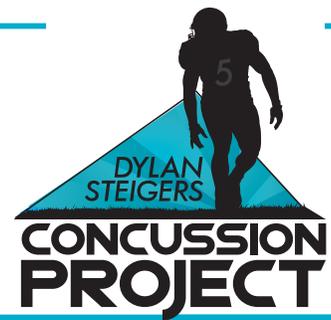


Concussion Rehabilitation Stepwise Return to School

Test • Educate • Protect

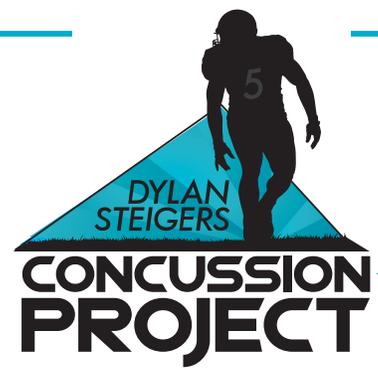


At the high school level, returning the student athlete to school is generally the highest priority and the one that carries the lowest risk once symptoms have disappeared. The school nurse, guidance counselor, certified athletic trainer, athletic staff, psychologist and social worker should be made aware of the student athlete's injury and *work as a team* to coordinate these accommodations. Attending school presents a major problem for student athletes suffering from a concussion no matter the level. Teachers and professors often believe that the student-athletes are malingering and they can be less than sympathetic when student athletes are excused from tests, or need extra time for tests and turning in papers. The absence of visible signs of injury, such as a cast, brace or bandage, contributes to this misunderstanding.

Adolescents with concussions may want to attend school out of fear they will miss necessary work and get too far behind. Since student-athletes with concussions seem to recover more rapidly with rest, we recommend that activities should be restricted for several days following the injury until they are symptom free. Exercise, whether it is physical or mental, will usually increase their symptoms: headache, dizziness, nausea and light-headedness. Most student athletes will have difficulty with concentration, memory (both working and short term), and their processing speed—which negatively affects their learning and performance.

In turn, struggling to learn and perform “overuses” the brain at a time when it is working hard to recover, and can negatively affect recovery. For this reason a concussed individual should not return to school until his/her headaches and other symptoms have cleared. At home, the student-athlete should rest. To minimize increased oxygen demands on the injured vulnerable brain cells, athletes should not participate in the following activities: reading, computer use, video games, text messaging, physical exercise, hot tubs and socializing with friends. Attending movies may cause a marked increase in symptoms if the student-athlete experiences difficulty with light or noise.





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When student athletes are symptoms free, they can begin trying brief periods of reading or studying. If headaches or other symptoms return they should discontinue the activity and resume rest. They may return to school for gradually increasing periods of time when they can tolerate a couple of hours of thinking. Some student-athletes may require starting school later in the day in order to sleep longer. They should be driven to school to avoid noise on the bus or the exercise of walking to school.

Student-athletes may attend classes unless they develop symptoms (usually a headache). If they become symptomatic they should go to the nurse's office, lie down, and skip the next period. (Rest periods often may be necessary when student-athletes first return to school.) If symptoms occur again in the next period, after resting, they should return home. Math and chemistry classes may need to be avoided initially since they seem to cause more symptoms than other classes. If a student-athlete can only attend school part-time, non-core classes should be avoided in favor of core subjects (English, History, Science and Language).

Approximately 10% of student-athletes with concussions have symptoms lasting over a month and they are considered to have a Complex Concussion (the newest terminology) or what in the past was described as Post-concussion Syndrome. Some student-athletes may need to have a 504 plan (spells out the modifications and accommodations that will be needed for these students to have an opportunity perform at the same level as their peers) adopted and some student-athletes who cannot tolerate the active school environment may require home tutoring. The guidance counselor may be asked to expedite some of these accommodations.