

# ACADEMIC RECOVERY GUIDELINES AFTER CONCUSSION

Each course of action will have to be adjusted to the student's individual needs.

REHABILITATION STAGE	STAGE LENGTH	GOALS	RECOMMENDED ACTIVITIES
<b>REST</b>	2 – 4 day	<p><b>Minimal cognitive activity (brain work) and academics.</b></p> <ul style="list-style-type: none"> <li>• If symptoms are severe, consider staying home from school for a few days.</li> <li>• Minimize electronics use.</li> </ul>	<p>Inform school of the child's concussion. Ask for a team leader at school to be the point person for the return to learn process (such as a guidance counselor, school nurse or athletic trainer)</p> <p>Minimize screen time. Use computer if necessary for school, but in short intervals (15 minutes with breaks). Avoid video games and movie theaters back at school full time with no symptoms.</p> <p>Child may sit out of school for two to four days, but if symptoms are mild can attend for half days or full days as long as symptoms don't worsen. If symptoms are gone and child can tolerate school, it's okay to skip steps and proceed to full academic work.</p>
<b>RE-ENTRY</b>	2 – 10 days	<p><b>Light to moderate cognitive activity. Try not to get too far behind in school but avoid making symptoms worse.</b></p> <ul style="list-style-type: none"> <li>• Attend school half or full days when able to listen, do light reading and can tolerate light exposure for 30 minutes (don't have to be completely symptom free).</li> <li>• Take rest breaks throughout the day if symptoms worsen.</li> <li>• Sit out of classes that might make symptoms worse (such as band).</li> </ul>	<p>Work with school to:</p> <ul style="list-style-type: none"> <li>• Determine if work is excused (not to be made up), modified (must complete modified version of original assignment) or responsible (must be completed in full by student).</li> <li>• Prioritize work in each class (what needs to be done first and what can wait to be completed at a later date).</li> <li>• Create a schedule for completing missed and upcoming assignments over the course of a few weeks. Then spread out make-up work in a calendar.</li> </ul> <p>Your doctor may send a note requesting temporary academic adjustments including:</p> <ul style="list-style-type: none"> <li>• extra time to complete modified tests or quizzes</li> <li>• reduce essay length and homework</li> <li>• delay or reschedule high-stakes tests or standardized tests</li> </ul> <p>If symptoms worsen, the child may rest at their desk or go to nurse's office.</p> <p>Consider scheduled breaks spread out during day.</p> <p>Do homework in 15- to 30-minute blocks. Increase time as symptoms decrease.</p>
<b>REINTEGRATION</b>	10 – 14 days	<p><b>Moderate to high cognitive activity. Avoid making symptoms worse.</b></p> <ul style="list-style-type: none"> <li>• Attend school full days.</li> <li>• Begin to complete make-up work.</li> </ul>	<p>Continue to check in with teachers to assess what remaining work needs to be done.</p> <p>Consider untimed tests and continue to increase the amount of homework completed.</p> <p>The goal at this stage is to avoid the return of severe symptoms, but keep in mind that "brain work" is not dangerous and symptoms worsened by reading will not injure the brain.</p> <p>As symptoms improve, your doctor may also begin prescribing light, noncontact exercise.</p>
<b>RETURN</b>	When symptoms are gone	<p><b>Full cognitive activity</b></p> <ul style="list-style-type: none"> <li>• Attend full school days.</li> <li>• Complete any make-up work.</li> </ul>	<p>Attend all classes and full days of school without breaks. Fully resume classwork, homework and major assignments.</p> <p>Finish make-up work and testing.</p>

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