## MSHSAA RETURN TO LEARN – BACKGROUND AND SUGGESTIONS What is Returning to Learn After a Concussion?

A concussion is an injury to the brain that affects how the brain can function. Commonly, a person with a concussion can experience headaches, dizziness, troubles with loud noises or bright lights, difficulty focusing and difficulty concentrating. Some students may have only a few symptoms and others may have many symptoms. These symptoms may affect a student's ability to perform at their normal ability in school.

Once diagnosed with a concussion (which may happen through the athletic trainer or another healthcare professional), it is important for the appropriate individuals at the school to be notified of the injury. That may be a school nurse, counselor, athletic trainer, specific teacher or other individual designated by the school as the point person for getting the information to all the student's teachers about the concussion diagnosis.

Following the diagnosis, the school can then make adjustments to the student's environment (as examples: changing seating, reducing brightness on computer monitors, allowing a student to be in a quieter area of the class, allowing breaks in the nurse's office if symptoms increase) and to the students workload (as examples: giving extra time for assignments or testing, reducing overall workload and homework, providing the student assistance in concepts that may be causing struggles).

A school is able to make adjustments without a note from a healthcare professional. These can be temporary adjustments until the student is able to have a formal evaluation from a healthcare professional. It would benefit the student for these adjustments to be applied as soon as possible and not delayed based on the provision of a healthcare provider's note.

Since most concussion in young athletes resolve within 3-4 weeks, it is not expected that adjustments are necessary for prolonged periods of times, but a small percentage of students may have difficulties that linger. In prolonged cases of concussion, schools may need to consider implementing a 504 plan to formalize the adjustments for the student.

Ideally, students with concussions should be encouraged to communicate with their individual teachers about their specific symptoms as they may change from class to class or from day to day. Since many of the symptoms of concussion are not outwardly visible to others, the communication is critical to keep everyone 'in the loop' about what the student is struggling with so the teachers and school has the most accurate information to help assist the student through whatever means they feel would be best.

Several research studies have demonstrated that prolonged periods of time out of school do not help a student's recovery and may actual lead to increased symptoms and a longer recovery. Prolonged absences also can lead to additional stress the student may experience, including the stress of getting behind on homework and missing out on key concepts to help with their learning.

Even though a student may experience worsening of symptoms during the school day, no research has demonstrated that the act of doing school work is harmful to recovery. It is important for the student, however, to make adjustments to minimize significant periods of worsening symptoms.

Sample school note a healthcare professional can utilize to document recommendations for the student as well as current reported symptoms.

## SCHOOL RECOMMENDATIONS FOLLOWING CONCUSSION

Patient Name:	Date of Birth:
Date of Evaluation :	Referred by:
Duration of Recommendations :1 week2 week	s 4 weeks Until further notice
The patient will be reassessed for revision of these recommendations in weeks.	
This patient has been diagnosed with a concussion (a brain injury) and is currently under our care. Please excuse the patient from school today due to the medical appointment. Flexibility and additional supports are needed during recovery. The following are suggestions for academic adjustments to be individualized for the student as deemed appropriate in the school setting. Feel free to apply/remove adjustments as needed as the student's symptoms improve/worsen.	
Attendance    No school for school day(s)    Attendance at school days per week    Full school days as tolerated by the student    Partial days as tolerated by the student	Breaks    Allow the student to go to the nurse's office if symptoms increase    Allow other breaks during the school day as deemed necessary and appropriate by school personnel
Visual Stimulus     Change classroom seating as necessary     Pre-printed notes for class material or note taker     Avoid extremes of light/dark in classrooms     Reduce brightness on monitors/screens	Audible Stimulus     Lunch in a quiet place with a friend     Avoid music or shop classes     Allow to wear earplugs as needed
Workload/Multi-Tasking     Reduce overall amount of make-up work, class work and homework     Prorate workload when possible     Reduce amount of homework given each night     Excuse from makeup work if possible	Testing     Additional time to complete tests     No more than one test a day     No standardized testing until     Allow for scribe, oral response, and oral delivery of questions, if available
Physical Exertion	Additional Recommendations
No physical exertion/athletics/gym/recess	
Walking in gym class only	
Begin return to play protocol as outlined by	
return to activity form	
Current Symptoms List  (the student is noting these today     Headache   Visual problems      Nausea   Balance problems      Dizziness   Sensitivity to light	y) Sensitivity to noise Memory issues Feeling foggy Fatigue Difficulty concentrating Irritability
Student is reporting most difficulty with/in	
All subjects Reading/Language arts	Foreign Language Math
Science Music	History    Using Computers
Focusing Listening	Other: