



Township High School District 113

Deerfield High School
Highland Park Highland

Return to Play (RTP): Concussion Care Protocol

General Information:

A student's best chance of full recovery from a concussion involves individualizing student's cognitive and physical stimuli 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 theater, 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: driving can be difficult for students with symptomatology.

These stimuli should be limited, or regulated for a period of time during recovery from a concussion. Some students are quite sensitive to any physical and cognitive exertion, and others are not. It is recommended that this protocol is shared with the student's healthcare provider during the initial visit.

Stages of Concussion Recovery and Extracurricular Participation:

Stage 1: Limit stimulation as tolerated by the student (Options for modified daily class schedule)

Stage 2: Limited school work (Options for modified daily class schedule)

Stage 3: Moderate academic work

Stage 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 healthcare provider within one week. School nurses will work with families to provide resources to healthcare providers when needed
- 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.
- 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 healthcare provider to the trainer before the student is allowed to practice or compete. Athletic trainers will communicate with coaches to ensure that students feel well enough to watch practices prior to doing so.
- **For in-season Activities:** Report to your sponsor. Written clearance from the healthcare provider to the school nurse is required before the student is allowed to attend meetings or activities.

District 113 Athletic Department Return-To-Play Protocol

- Written clearance from the healthcare provider is required to begin full participation in their contact sport
- 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, the athletes will be supervised by the athletic trainers on an individual basis before repeating that phase:

Prior to the Four Stage progression of Return to Play, the athlete may be encouraged to participate in light aerobic activity under the sub-symptom threshold.

- 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

Four Stage Progression to Full Return to Extracurricular (Activity and Athletic) Participation

Some students may progress through or skip stages depending on symptomatology.

<p>Stage 1: Adjustments to physical and cognitive rest as tolerated: Return to School (Options for modified daily class schedule)</p>
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Characteristics:

- May have severe symptoms at rest
- Symptoms may include but are not limited to:
 - Headache or pressure in the head, dizziness, nausea, light and/ or noise sensitivity, inability to focus/concentrate, memory loss/lack of recall, feeling mentally “foggy”, unusual changes in mood, fatigue.
 - Student may complain of intense and continuous/frequent headaches

Interventions: (including but not exclusive)

-Initial evaluation by healthcare provider

Athletics/Activities:

- Student may not attend before/after school meetings or events

School Nurse:

- School nurse will email the Return To Learn (RTL) plan to student’s teachers and appropriate staff
- If the student remains in stage 1 for longer than one week, the school nurse will ask the parent/guardians to consult with the health care provider when needed. • School nurse will update email to appropriate staff as student is progressed in the protocol stages

Progress to Stage 2 when:

- Decreased sensitivity to light and/or noise.
- Decreased intensity and frequency of headaches and dizziness.
- Decreased feeling of “fogginess or confusion”; increased ability to focus, memory/recall.

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Stage 2: Limited school work (Options for modified daily class schedule)

Characteristics:

- Mild symptoms at rest, but increasing with mental and physical activity.

Interventions: (including but not exclusive)

Athletics:

- Student may participate in low-level aerobic activity under sub-symptom threshold.
- Report to athletic trainer as directed by the trainer

Activities:

- Student may participate in low-level aerobic activity under sub-symptom threshold

School Nurse:

- Student should report to the school nurse as directed by school nurse
- School nurse will update email to appropriate staff as updated medical notes received and/or student is advanced in the protocol stages

Progress to Stage 3 when:

- School activity does not increase symptoms significantly
- Overall symptoms continue to decrease

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Stage 3: School attendance with increasing academic work

Characteristics:

- Symptom-free at rest
- Mild to moderate symptoms with cognitive and school-day activity

Interventions: (including but not exclusive)

Athletics:

- Student may participate in low-level exertion activity as tolerated and directed by healthcare provider
- Continue to report to athletic trainer as directed by the trainer

Activities:

- Student may observe before/after school meetings or events as tolerated. Student will not perform or participate in physical activities until cleared by medical provider.

School Nurse:

- Student should report to the school nurse as directed by school nurse
- School nurse will update email to appropriate staff as updated medical notes are received or student is progressed in the protocol stages.
- Athletic Trainer will supervise non-contact activity.

Progress to Stage 4 when:

- Symptom-free with cognitive and physical activity
- Student should report any return of symptoms with cognitive or school day activity immediately to school nurse or athletic trainer
- Written concussion clearance by healthcare provider to school nurse for return to full curricular academics, and extracurricular Activities, and Athletics.

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Stage 4: Full Extra Curricular and Athletic Participation

Characteristics:

- Asymptomatic with academic/cognitive and physical activity

Interventions: (including but not exclusive)

Athletics:

- written clearance from healthcare provider or athletic trainer is required for student to return to Athletics
- copy of activity clearance will be given to nurse and athletic trainer if necessary
- Required to follow the IHSA Return-to-Play Protocol under the direction of the athletic trainer
- report to athletic trainer as directed

Activities:

- Written clearance from healthcare provider is required for student to return to full participation in the activity.

School Nurse:

- Student should report to the school nurse with clearance note if needed.
- Student should return to Health Services as needed based on symptoms and nursing assessment
- School nurse will send clearance email to appropriate staff including Athletics and Activities staff
- School nurse will see student for follow up as needed.

Illinois High School Association, Return to Play Six-step progression -each step being completed approximately 24 hours apart.

Step 1: Symptom-limited activity: Activities that do not worsen symptoms • **Goal:** Gradual reintroduction of work/school activities.

Step 2: Light aerobic exercise: Walking or stationary bike workout
• **Goal:** To increase heart rate with limited head movement.

Step 3: Sport-specific exercise: Jogging, sprinting, and calisthenics
• **Goal:** To increase heart rate with head and body movement.

Step 4: Non-contact drill work at practice: Includes progressive resistance training • **Goal:** Increase conditioning, coordination and cognitive load.

Step 5: Full contact practice: Participate in normal practice drills following medical clearance • **Goal:** Restore confidence and assess functional skills

Step 6: Clear for competition: Normal game play

For additional questions, please contact the School Nurse, Activities Director or Athletic Trainer

Deerfield High School:

Job Title	Name	Phone	Email
School Nurse	Sharon Urban	224-632-3201	surban@dist113.org
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Athletic Trainer	Karl Lindblad	224-632-3117	klindblad@dist113.org
Activities Dept. Chair	Brian Verisario	224-632-3020	bverisario@dist113.org

Highland Park High School:

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Activities Dept. Chair	Lesafriedrich	224-765-2370	lesafriedrich@dist113.org

Physician: Dr. Nicole Reams

School Administrator:Roslyn Martin

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