

STEP 1

REMOVE/REDUCE

REMOVE student/athlete from high risk physical activities. **REDUCE** school demands and home/social stimulation. See page 6 of the REAP Manual for details.

REMOVE/REDUCE (school)

Remove the student from high risk physical activities; encourage light non-contact cardiovascular activities (e.g. brisk walk, stationary bike, feet on the ground, no jumping, climbing and stay off anything with wheels).

Teachers should **Reduce**/cut back academic demands to keep symptoms at bay.

REMOVE/REDUCE (family)

- Remove the student from high-risk physical activities immediately, including play at home (e.g playground, bikes, skateboard), recreational and/or club sports; encourage light non-contact cardiovascular exercise (e.g brisk walk, stationary bike) as long as there is no risk of further head impact.
- Reduce or limit home/social stimulation. Do not totally restrict electronics and social activities; make a reasonable home plan. Encourage rest for the first few days followed by a gradual re-introduction of cognitive, social and home activities.

STEP 2

EDUCATE

EDUCATE all teams that symptoms tell the story of the recovery of the concussion. See page 7 of the REAP Manual for details.

COMMUNICATE WITH AND EDUCATE PARENTS AND SCHOOL PERSONNEL

EDUCATE

Assigned person in the school team communicates about the student's concussion to pertinent school personnel and discusses expectations with student.

Assigned person sets a health condition alert in the district documenting system for a concussion.

EDUCATE

Assigned person in the school team sends a standardized concussion letter to quardians:

= Family Team

= Medical Team = School Physical Team

(Athletic & Health)

= School Academic Team

- Affirming student has a concussion or concussion symptoms
- Stating that the school has a plan for supporting students with concussions
- Outlining school's expectations of the student and family

STEP 3

ADJUST/ACCOMODATE

Educators: See pages 9 & 10 of the REAP Manual for details. Symptom Checklist and Teacher Feedback Form in Appendix of REAP Manual, Parents: See page 8 of the REAP Manual.



Begin once weekly conversational monitoring with student:

• Symptom Review • Academic Review • Mental Health Check-in

- Enter specific school personnel email addresses into CO TACT [password: TACTcolorado2020] notify and communicate about concussion information and distribute information on TIER 1 fluid academic adjustments.
- TIER 1 fluid adjustments begin. ACADEMIC ADJUSTMENTS are heavily front loaded and slowly removed as symptoms improve.
- Each student may experience symptoms differently, therefore, different adjustments may be needed.

Parents Return to School

MEDICAL CLEARANCE IS NOT NEEDED FOR RETURN TO SCHOOL

- Medical confirmation is NOT needed to begin supporting a student with a reliable history of a hit to the head and symptoms.
- Generally most students are able to Return to School within 24-48 hours following an injury even with symptoms that are tolerable, intermittent and amenable to rest.

REPEAT WEEKLY CONVERSATIONAL SYMPTOM, ACADEMIC & MENTAL HEALTH REVIEWS FOR 4-6 WEEKS OR UNTIL READY TO MOVE TOWARD CLEARANCE

STEP 4

PACE

Pace includes the Criteria toward Clearance. (page 11) & the Graduated Return to Play steps (See page 12 of REAP Manual for details)

When symptom reviews are back to baseline (per school nurse, ATC)

CRITERIA TOWARD CLEARANCE AND RETURN TO PLAY

When academics/behaviors are back to pre-concussion levels in classroom (per teacher)

When symptom/behaviors are back to baseline at home (per parent/quardian)

Return to Play:

When student is back to baseline in above areas, the medical professional can approve the start of the Return to Play (RTP) process Steps 4-6.

When RTP completed, the school team(s) can resolve the health condition alert in documenting system.

All student-athletes must have written & signed clearance from a licensed medical professional before returning to play.

Students who are non-athletes should follow best practices and seek clearance by a medical provider and complete a return to play process.

If student is still experiencing symptoms after 4+ weeks, refer to the school problem solving team for continued academic supports via TIER 2 academic accommodations. **ACADEMIC ACCOMMODATIONS ARE TIER 2 SUPPORTS.**