
C-3 Documentation of Medical Assessment

This form to be provided to a student that demonstrates or reports concussion sign(s) and/or symptom(s). For more information, consult C-2 “Tool to Identify a Suspected Concussion.”

Student Name _____ Date _____

The student must be assessed as soon as possible by a medical doctor or nurse practitioner. In Canada, only medical doctors and nurse practitioners are qualified to provide a concussion diagnosis. *Prior to returning to school, the parent/guardian must inform the school principal/designate of the results of the medical assessment by completing the following:*

Results of Medical Assessment

My child/ward has been assessed and **a concussion has not been diagnosed** and therefore may resume full participation in learning and physical activity without any restrictions.

My child/ward has been assessed and **a concussion has not been diagnosed but the assessment led to the following diagnosis and recommendations:**

My child/ward has been assessed and **a concussion has been diagnosed** and therefore must begin a medically supervised, individualized and gradual Return to School (RTS) and Return to Physical Activity (RTPA) Plan. Refer to the attached page for information on the Home Preparation for RTS and RTPA Plan.

Comments:

Medical Doctor/Nurse Practitioner providing assessment

Name _____ Phone Number _____

Parent/Guardian signature _____ Date _____



Information for Parent/Guardian regarding C-4 - Home Preparation for Return to School (RTS) and Return to Physical Activity (RTPA) Plan

Should a student be diagnosed with a concussion, the student will be expected to follow a Return to School (RTS) and Return to Physical Activity (RTPA) Plan. There are two parts to a student’s RTS and RTPA Plan – the first begins at home with the Home Preparation for RTS and RTPA Plan (see Table 1: Student at Home which provides an overview of the first part of the plan).

Table 1: Student is at HOME	
Home Preparation for Return to School (RTS) Stages	Home Preparation for Return to Physical Activity (RTPA) Stages
Each stage must last a minimum of 24 hours	*Each stage must last a minimum of 24 hours*
<u>RTS – Initial Rest</u> 24-48 hours of relative cognitive rest	<u>RTPA – Initial Rest</u> 24-48 hours of relative physical rest
<u>RTS – Stage 1</u> Light cognitive (thinking/memory/knowledge) activities Gradually increase cognitive activity up to 30 minutes. Take frequent breaks.	<u>RTPA – Stage 1</u> Light physical activities that do not provoke symptoms Movements that can be done with little effort (do not increase breathing and/or heart rate or break a sweat)
Wait a minimum of 24 hours before moving to the next stage	Wait a minimum of 24 hours before moving to the next stage
<u>RTS – Stage 2</u> Gradually add cognitive activity. When light cognitive activity is tolerated, introduce school work (at home and facilitated by the school)	<u>RTPA – Stage 2a</u> Daily activities that do not provoke symptoms Add additional movements that do not increase breathing and/or heart rate or break a sweat
	<u>RTPA – Stage 2b</u> Light aerobic activity (that is, activities at a pace that cause some increase in breathing/heart rate but not enough to prevent a student from carrying on a conversation comfortably)