Concussion Information Sheet



What is a concussion?

A concussion is a brain injury that affects how the brain works. It can happen after a blow to the head, face, neck, or body. A person does not have to lose consciousness to have a concussion. Symptoms often appear immediately but may also start 1-2 days after the injury. A concussion can't be seen on x-rays or brain scans.

Common symptoms of a concussion are:

Physical:

- Headaches
- Dizziness
- Nausea or vomiting
- Blurred or fuzzy vision
- · Sensitivity to light or sound
- Balance problems
- Reduced exercise tolerance

Cognitive/Mental:

- · Feeling slow or tired
- Low energy
- Not thinking clearly
- Difficulty with computer work
- Difficulty reading
- Difficulty remembering

Emotional:

- Easily upset
- Easily angered
- Feeling sad
- Nervous/anxious
- Feeling more emotional

Sleep and fatigue:

- Sleeping more
- Sleeping less
- Difficulty falling asleep
- Difficulty staying asleep

What should a person do if they think they or another person may have a concussion?

If a concussion is suspected, stop the activity right away and see a medical doctor or nurse practitioner. Adults and children with a concussion should get guidance from a doctor or nurse practitioner before returning to full contact sport or high-risk activities for another concussion. "If in doubt, sit them out."

Red flag symptoms

Symptoms of a more severe injury may appear right away or up to a couple of days after the injury. If any of following symptoms are observed, call an ambulance or bring the person to a doctor for immediate medical care:

- Increased confusion
- Worsening severe headache
- Vomiting repeatedly
- Seizures
- Not waking up
- Trouble walking
- Difficulty talking
- Strange behaviour

How long does it take to recover from a concussion?

- Concussion recovery is different for each person.
- Typically, children and adults recover within 2-4 weeks; adolescents may take longer to become symptom-free.
- Up to 30% of people may have a slower recovery; doctors can screen for risk factors of a prolonged recovery.
- · For those at risk for a slower recovery, very early care from an interdisciplinary concussion team is recommended. Interdisciplinary teams should include doctors and clinicians across different disciplines who work together to assess, diagnose, and create a treatment plan.

Recovery tips:

- Complete rest for more than 2 days after a concussion may slow recovery and is no longer recommended. Use the suggested return to activity and school/work protocols on page 2.
- · Avoid any activity that has a risk of body contact, falling, or hitting one's head until medically cleared by a doctor.
- Early care (as early as 1-2 days after the injury) by an interdisciplinary concussion team may help people get back to activities faster and safer.
- Supervised aerobic exercise (walking, stationary bike) as early as 1-2 days after the injury may improve recovery.
- School with accommodations should begin after 1-2 days. Missing more than one week of school may be harmful. Medical clearance is not required to return to school.
- Ensure good quality sleep, drink water, and eat balanced meals. Avoid drugs and alcohol.
- · Emotional changes are common with concussion; mindfulness, exercise, and speaking with people you trust can help.
- Computer screens, smartphones and video games may bring on symptoms; avoid these in the initial days if they make symptoms worse.



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Return to Activity Protocols



Return to Physical Activity/Sport Protocol:

Step 1	Step 2	Step 3	Step 4	Step 5	Step 6
Light activities (1-2 days max)	Aerobic exercise	Sport-specific physical activities and training exercises	Non-contact activities and sports training drills	All non-competitive activities and full contact practices	Full participation in all sport activities including competition
Activities at home such as social interactions and light walking. No screentime.	Walking, jogging, cycling on a stationary bike, light resistance training. Symptoms are expected and may mildly increase. Aim for 20-30 minutes at a time. Take a break if moderate or severe increase in symptoms.	Running, changing direction, individual training drills, individual gym class activities, increased resistance training as tolerated. Symptoms may mildly increase.	Multiplayer training, high-intensity exercises, supervised non-contact gym class activities, sport practices without body contact.	Higher risk activities, all school gym class activities, full-contact sports practices and scrimmages. Avoid competitive gameplay.	Unrestricted competitive gameplay and all physical activities.
No team sports or activities that have any risk of head impact, collision, or falling.			These steps are only permitted if a person has medical clearance from a Doctor and has completed step 4 of Return to School.		
Goal: Take more rest if needed in first 1-2 days. Avoid sports. Gentle activity is encouraged.	Goal: Increase heart rate to treat concussion. Gradually increase the intensity of aerobic activities as tolerated.	Goal: Increase intensity of aerobic exercises, start low-risk sport-specific movement.	Goal: Resume usual intensity of exercise to full exertion without body contact.	Goal: Adjust to full contact game play and higher risk/high speed activities	Goal: Resume full activities and competitions

Return to School and Work Protocol:

Step 1	Step 2	Step 3	Step 4
Light activities (1-2 days max)	School and work activities (in-person or at home) as tolerated	Return to part-time or full-day school/work with support	Return to full school activities (full academic load)
Activities at home such as social interactions, light walking, board games, talking on the phone, crafts. No screened devices. No driving a motor vehicle. Contact school or work to make a return plan.	Return to in-person school/work for partial or full days as soon as possible	Gradually reduce accomodations and increase workload until full day inperson school/work can be tolerated. Accommodations should be tailored to the current symptoms. Examples: light homework, low cognitive burden work tasks, extra time for tasks.	Full activities including regular

Medical clearance is not required to return to school and participate in low-risk school activities (activities that do not have a risk of head injury/falling/collisions).



Instructions: Step 1 of both protocols should be started at the same time immediately after injury. Step 1 should last a <u>maximum</u> of 2 days, then proceed to step 2. Return to activity/sport: Move from steps 2 to 3 as long as symptoms are tolerated, it is expected that some symptoms may still be present. Steps 3-6 and resuming any work or school-related activity with a risk of head injury, falling, or colliding requires medical clearance from a doctor; returning too early to high-risk physical activities increases the risk of another injury and may slow recovery.