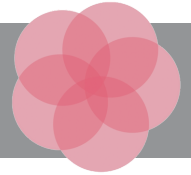


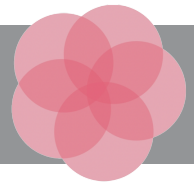
Return to Camp Protocol



Step 1	Step 2	Step 3	Step 4	Step 5	Step 6
<p>Rest (1-2 days maximum)</p> <p>Calm/quiet activities that do not worsen symptoms. Contact camp or talk to the camp nurse to make a return plan.</p> <p>Examples: Quiet games, talking with friends, crafts, light walking as long as it does not increase the heart rate.</p> <p>Avoid: Camp activities or environments that make the person feel worse, screened devices, sports, reading.</p>	<p>1-2 hours/day light physical activities at camp</p> <p>Light physical activities (20-30 minutes at a time). Symptoms may increase. Take a break if the increase in symptoms is more than mild or the increase in symptoms cannot be tolerated.</p> <p>Examples: Walking, jogging, or cycling on a stationary bike. Other camp activities may include reading, singing, some screened devices (if tolerated), eating in the dining hall, other modified or low-risk camp activities such as low-intensity supervised water-based camp activities that do not make symptoms worse for short time periods.</p> <p>Avoid: Sports, resistance training.</p>	<p>Return to 1/2-day low-risk camp activities</p> <p>Modify camp activities and allow breaks to enable participation while tolerating existing concussion symptoms. Emphasize social connections.</p> <p>Examples: Low-risk sport specific drills, light resistance weight training, non-contact aquatic sports, participation in other low-risk camp sporting activities.</p> <p>Avoid: Sports drills or camp activities that have head impact, risk of collision, or falls. No diving or sailing.</p>	<p>Return to full-day low-risk camp activities</p> <p>Full-day camp with modified activities tailored to the current symptoms. Expand participation to include all non-contact camp activities and aerobic activities.</p> <p>Examples: Non-contact aquatic sports, non-contact sport drills, increased resistance training. Decision to participate in low-risk off-site day trips may be made at this step with judgment from camp nurse or designated medical personnel.</p> <p>Avoid: Impact sports, diving, sailing, overnight backcountry trips.</p>	<p>Return to all non-competitive camp activities</p> <p>Full days at camp, no concussion-related accommodations required.</p> <p>Examples: Full contact sports, scrimmages or game play at camp, diving, sailing, cycling outdoors, higher risk aquatic activities. Overnight backcountry trips permitted.</p> <p>Avoid: Competitive gameplay</p> <p>This step is only permitted if a person has medical clearance from a doctor.</p>	<p>Return to all competitive activities</p> <p>Full days at camp, no concussion-related accommodations required.</p> <p>Full participation in all sport activities including competition.</p> <p>Full contact game play without restrictions.</p> <p>This step is only permitted if a person has completed step 5 (with medical clearance).</p>
<p>Goal: Minimal mental and physical activity</p>	<p>Goal: Increase the heart rate and aim to return to low-risk camp activities for 1-2 hours to connect socially</p>	<p>Goal: Half-day participation in camp activities. Increased intensity & time of low-risk physical activities</p>	<p>Goal: Increase aerobic activities to full exertion without body contact.</p>	<p>Goal: Adjust to full camp participation and gameplay in sports</p>	<p>Goal: Resume competitions</p>

This protocol should only be used after a comprehensive medical assessment by a physician or nurse practitioner. If symptoms worsen, return to the doctor/NP for another assessment. Progression through the steps should be under the supervision of a medical professional whose clinical judgment should be used to support decision making. **Instructions:** Steps 1 should last a **maximum of 2 days**, then proceed to step 2. Move from steps 2 to 4 as long as symptoms are tolerated. A minimum of 24 hours is required at each step. It is expected that some symptoms may still be present. If unsure about progression with specific activities, consult with an MD or NP. **Step 5 requires medical clearance from a doctor**; returning too early to high-risk physical activities increases the risk of another injury and may slow recovery. Medical clearance is not required to progress through steps 1-4 of the return to camp protocol.

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 any activity that has a risk of a blow to the head, falling, or body contact. *"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 camp protocol.
- 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.
- Returning to camp and/or school with accommodations should begin after 1-2 days of rest.
- Missing more than one week of school may be harmful. Medical clearance is not required to return to low-risk camp or school activities.
- 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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