

Suspected Concussion

at **Lisgar** or School Activity
[Appendix C](#) - Identification Tool
Stop activity call: 911, Parents, LCI Emergency Response Team & **Administration**

Student **must seek** medical attention
Fill out [Appendix D](#)

Teacher/Coach fills OSBIE Report
<http://osbie.on.ca/incident-reports/>
Hand into **Administration**

Parent must sign

Step 1

Community Concussion

Parent informs school or student reports concussion

Diagnosed Concussion
Step 1 - student must be symptom free to **return to learn** (minimum 24 hrs) All steps 24hr

Medical note required

Return to Learn Step 2a

[Appendix E](#) - complete, signed and returned to Guidance.
Symptoms have improved.
Student has specialized return to learn program. **Administration** informed of students return.

Co-ordinated by Guidance

Step 2

Return to Learn Step 2b

Student attends regular classes. This step occurs at same time as Step 2
Return to Physical Activity

Co-ordinated by Guidance

Return to Physical Activity 2b

***Administration** must be informed

Step 2. Light Aerobic activity

Step 3. Light sport Specific activity

Step 4. Resistance training

Medical note required

Step 5: Full participation in non-contact activity following medical clearance.

Step 6: Full participation in contact sports

RESOURCE • Ontario portal:
www.Ontario.ca/concussions
OCDSB Concussion Policy PR. 561. SCO Appendix A

