



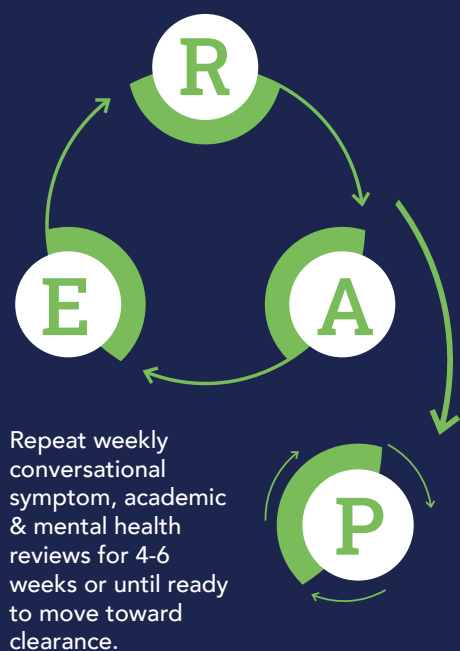
# R.E.A.P

**R-** Remove from high risk physical activities, Reduce home and cognitive demands

**E-** Educate, let the symptoms direct the interventions

**A-** Adjust/Accommodate home/social and school/academic activities

**P-** Pace includes covering all Criteria toward Clearance and the Graduated Return to Play steps



REAP Manual

TACT Tool



# CONCUSSION MANAGEMENT

**KEY** ■ = Family Team ■ = Medical Team ■ = School Physical Team ■ = School Academic Team (Athletic & Health)

**CONCUSSION IDENTIFIED**  
Identification/Notification of a student's concussion may come from Parent, Student, Secretary, Health Tech, Nurse, Teacher, Athletic Trainer, Administrator or Other

**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 guardians:

- 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/ACCOMMODATE**  
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 **NE TACT** [password: **TACTnebraska2020**]. 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 Criteria toward Clearance (**page 11**) & the Graduated Return to Play steps (**page 12** of REAP Manual for details)

**CRITERIA TOWARD CLEARANCE AND RETURN TO PLAY**

- When symptom reviews are back to baseline (per school nurse, ATC)
- When academics/behaviors are back to pre-concussion levels in classroom (per teacher)
- When symptom /behaviors are back to baseline at home (per parent/guardian)

**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.**