**Medical Assessment Letter**

***To the Physician/NP: This athlete has been identified as having possibly sustained a concussion. Freestyle Canada’s policy is that all athletes who sustain a suspected concussion should be reviewed by a physician or nurse practitioner\*, as per the Canadian Guideline on Concussion in Sport. (insert URL link here) We appreciate your assistance in helping this athlete safely return to his or her sport.***

**Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Athlete Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Results of the Medical Assessment:**

☐ This patient has not been diagnosed with a concussion and can resume full participation in school, work, and sport activities without restriction.

☐ This patient has not been diagnosed with a concussion but the assessment led to the following diagnosis:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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☐ This patient has been diagnosed with a concussion.

☐ In the management of this confirmed concussion, I would recommend that this patient be allowed to participate in school and low-risk physical activity as tolerated starting on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(date).

Other Comments:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I have personally completed a Medical Assessment of this patient,

Signature/print \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

M.D. / N.P (circle the appropriate designation)\*

Freestyle Canada greatly appreciates your assistance in completing these form(s).

\* In rural or northern regions, the Medical Assessment Letter may be completed by a nurse with pre-arranged access to a medical doctor or nurse practitioner. Forms completed by other licensed healthcare professionals should not be otherwise accepted.

***To the Physician/NP in the case of confirmed Concussion:***

***In order to assist you in helping this athlete safely return to sport, we are providing for your reference the Return-to-School and Return-to-Sport Strategies as outlined in the current Canadian Guideline on Concussion in Sports. As you know, the goal of concussion management is to allow complete recovery of the patient’s concussion by promoting a safe and gradual return to school and sport activities. Your patient has been instructed to avoid all recreational and organized sports or activities that could potentially place them at risk of another concussion or head injury. Your patient has been advised not to return to any full contact practices or games until the coach has been provided with a Medical Clearance Letter provided by a medical doctor or nurse practitioner (attached), in accordance with the Canadian Guideline on Concussion in Sports.***

**Return-to-School Strategy**

The following is an outline for the *Return-to-School Strategy* that should be used to help student-athletes, parents, and teachers to partner in allowing the athlete to make a gradual return to school activities. Depending on the severity of the symptoms present, student-athletes will progress through the following stages at different rates. If the student-athlete experiences new symptoms or worsening symptoms at any stage, they should go back to the previous stage.

| Stage | Aim | Activity | Goal of each step |
| --- | --- | --- | --- |
| 1 | Daily activities at home that do not give the student-athlete symptoms | Typical activities during the day as long as they do not increase symptoms (i.e. reading, texting, screen time). Start at 5-15 minutes at a time and gradually build up. | Gradual return to typical activities |
| 2 | School activities | Homework, reading or other cognitive activities outside of the classroom. | Increase tolerance to cognitive work |
| 3 | Return to school part-time | Gradual introduction of schoolwork. May need to start with a partial school day or with increased breaks during the day. | Increase academic activities |
| 4 | Return to school full-time | Gradually progress | Return to full academic activities and catch up on missed school work |

**Return-to-Sports Strategy**

The following is an outline of the *Return-to-Sport Strategy* that should be used to help athletes, coaches, trainers and medical professionals to partner in allowing the athlete to make a gradual return to sport activities. Activities should be tailored to create a sport-specific strategy that helps the athlete return to their respective sport.

An initial period of 24-48 hours of rest is recommended before starting their *Sport-Specific Return-to-Sport Strategy.* If the athlete experiences new symptoms or worsening symptoms at any stage, they should go back to the previous stage. **It is important that youth and adult student-athletes return to full-time school activities before progressing to stage 5 and 6 of the Sport Specific *Return-to-Sport Strategy*.** It is also important that all athletes provide their coach with a Medical Clearance Letter prior to returning to full contact sport activities.

| STEP | ACTIVITY LEVEL | FREESTYLE SKI CONTEXT | Symptoms Present? |
| --- | --- | --- | --- |
| Yes | No |
| 1 | **No activity, only complete rest.** | Minimum of 24-48 hours of rest.Limit school, work and tasks requiring concentration. Refrain from physical activity until symptoms are gone.  |  | A physician, should be consulted before moving to step 2 |
| 2 | **Light aerobic exercise.** | Activities such as walking or stationary cycling. Someone who can help monitor for symptoms and signs should supervise the player. No resistance training or weight lifting. The duration and intensity of the aerobic exercise can be gradually increased over time if no symptoms or signs return during the exercise or the next day.Follow this 2-step process with 24 hours of rest between each step.1. Step 1 - 15 minutes on stationary bicycle, rest 24 hrs. If symptom free go to step 2
2. Step 2 - 60 minutes of more aggressive cardio work (75% of max Heart Rate) such as bike or jogging.
 | Return to rest and step 1 until symptoms have resolved.If symptoms persist, consult a physician. | Proceed to Step 3 only if athlete is: asymptomatic after 60 minute cardio session |
| 3 | **Sport specific activities** | Gentle skiing on flat, easy terrain. No jumping or jarring movements. No bouncing on trampolines. Continuous skiing for 60 minutes. | Return to rest until symptoms have resolved then resume at step 2. If symptoms persist, consult a physician. | Proceed to Step 4 the next day if asymptomatic. |
| 4 | **Begin Discipline Specific Drills (up to moderate intensity)** | 60 minutes of continuous discipline-specific training (on or off snow)- Skiing on moderate, terrain with moguls.- Skiing the halfpipe with small, easy jumps.- Riding “ability appropriate” boxes/rails - No big air tricks. - Small bouncing on trampoline or bounding drills.  | Return to rest until symptoms have resolved then resume at step 3.If symptoms persist, consult a physician. | The time needed to progress from non-contact exercise will vary with the severity of the concussion and with the player.Proceed to Step 5 with Medical Clearance Only. |
| 5 | **Begin Sport Specific Drills (up to full intensity) \*\*** | Gradually increase the intensity of training to include all normal training activities. | Return to rest until symptoms have resolved then resume at step 4If symptoms persist, consult a physician. | Proceed to Step 6 the next day. |
| 6 | **Game Play** | Return to Competition |  |  |

**What if symptoms occur?** Any athlete who has been cleared for physical activities, gym class or non-contact practice**,** and who has a recurrence of symptoms, should immediately remove himself or herself from the activity and inform the teacher or coach. If the symptoms subside, the athlete may continue to participate in these activities as tolerated.

Athletes who have been cleared for full contact practice or game play must be able to participate in full-time school (or normal cognitive activity) as well as high intensity resistance and endurance exercise (including non-contact practice) without symptom recurrence. Any athlete who has been cleared for full-contact practice or full game play and has a recurrence of symptoms, should immediately remove himself or herself from play, inform their teacher or coach, and undergo Medical Assessment by a medical doctor or nurse practitioner before returning to full-contact practice or games.

Any athlete who returns to practice or games and sustains a new suspected concussion should be managed according to the *Canadian Guideline on Concussion in Sport.*