Presenter Credentials: BSN, RN

Thank you for presenting your student at ECHO Idaho's K12 School Nurses session. Please keep in mind that your School District policies and Health Services procedures, medication administration protocols, and process guidelines remain the guiding principles to your practice. After reviewing the case presentation and discussion of this student's case among the ECHO Community of Practice, the following suggestions have been made:

Student Grade Level: 6th-8th

Summary:
A high-achieving middle school student has experienced 5th concussion, with history of prolonged recovery periods and lasting symptoms. Following most recent concussion from ~1 year ago, student has been utilizing accommodations through a 504 Plan, though teacher adherence varies. Student frequently uses nurse's office for brain breaks (1-3 times daily) and has shown improvement in headaches with Amitriptyline, though recovery remains ongoing. School nurse's absence has shifted student's care coordination to school counselor and substitute nurses. Additional challenges include minimal school facility updates (e.g., fluorescent lighting) and lack of clarity on student's recovery trajectory. Student and family are focused on achieving full academic recovery, adherence to accommodations, and a return to normal activities, including competitive sports. They are concerned about potential long-term academic impacts.

Question:
What is the best practice for activity management for repetitive concussions?
What are some other accommodations that would be best in this case?
What is the best way to motivate teachers regarding accommodations and need to follow them (e.g., 504 expectations)?

Recommendations:
- **Continue to Review and Adjust the 504 Plan Regularly:**
    o Meet with the family and school team frequently (e.g., every few months) to reassess the student's needs and progress, as concussion recovery is dynamic.
    o Include updates from the physician and school staff to ensure alignment between medical recommendations and school accommodations.

- **Communicate Observations with Healthcare Team:**
    o Share school-based observations, such as changes in brain break frequency or new symptoms, with the physician to help refine the recovery plan.
        ▪ For example, if there are any new or ongoing sleep disturbances, then communicate this to the physician, as sleep significantly impacts recovery and overall functioning.
    o Encourage the family to utilize platforms like MyChart to report sleep disturbances or other symptoms without requiring an in-person visit.

- **Create a Detailed Concussion Management Plan:**
    o Consider incorporating structured breaks, such as an automatic break after specific periods or classes, to prevent fatigue.
    o Reevaluate the suitability of the nurse's office as a quiet respite, considering potential environmental distractions.

- **Develop Metrics to Assess Plan Effectiveness:**
  - Track measurable indicators of progress, such as reduced reliance on brain breaks or improved tolerance for full-day schedules.
  - Use these metrics to evaluate whether accommodations should be modified or reduced over time.

- **Consider Emotional and Quality-of-Life Factors:**
  - Discuss the balance between physical risk and emotional well-being when considering the student's return to sports.
  - Engage the student, family, and physician in this decision, recognizing that quality of life and mental health are integral to recovery.

- **Educate Staff on Concussion Recovery:**
  - Consider conducting training sessions to address misconceptions, such as assumptions about a student's recovery based on their visible behavior (e.g., using a phone or interacting with peers).
  - Emphasize the invisible nature of concussion symptoms and the importance of following accommodations consistently.

Consider presenting follow-up for this student case or any other student cases at a future ECHO Clinic session.

Jocelyn Elvira– Program Manager, 208-364-4684, jelvira@uidaho.edu