

# RETURN TO ACTIVITY EDUCATIONAL BROCHURE

## Guidance for Service Members With Symptoms Following a Concussion

Defense and Veterans Brain Injury Center



### WHAT IS A CONCUSSION?

A concussion is a head injury from a hit, blow or jolt to the head that:

- briefly knocks you out (loss of consciousness), or
- may affect your ability to remember information before, during or after the event (post-traumatic amnesia), or
- makes you feel dazed, like you had your bell rung (alteration of consciousness)

A concussion is also known as mild traumatic brain injury (mTBI).

This brochure will help you to recover as quickly and safely as possible. Each stage is designed to help you gradually return to your normal routine, while your brain heals. You may have to stay at one stage longer than another if your symptoms do not go away or return when you try to do more activities. Everyone is different.

**Do not rush your progress.**

### WHAT SHOULD I EXPECT?

- Most people fully recover from concussions.
- Immediately or soon after the injury, you may have the symptoms noted on the table on the following page.
- Symptoms after a concussion can affect your performance, placing the safety of you or your unit at risk.
- These temporary symptoms resolve faster when your brain gets rest, so it is important for you to take time to gradually recover.
- Recovery is different for each person, but symptoms typically improve within hours, and resolve completely within days to weeks.

### Red Flags: When Should I Seek Help?

**If you experience any of the following, contact your primary care manager immediately:**

- passing out or blackouts
- weakness or numbness of any part of the body
- one pupil larger or smaller than the other
- slurred speech or difficulty speaking
- changes in hearing, taste or vision
- difficulty recognizing people
- not knowing where you are
- worsening headache
- unsteady on feet
- seizures
- vomiting
- unusual behavior
- double vision
- something just isn't right



## AVOID

- caffeine (it interferes with sleep)
- tobacco products
- sleeping aids or drugs, unless recommended to you by your health care provider

## RATE YOUR SYMPTOMS:

Each morning, rate your symptoms based on the table on the following page from 0-4.

**0** = Rarely or never present. **(None)**

**1** = Occasionally present but doesn't disrupt my activities. **(Mild)**

**2** = Often present and occasionally disrupts my activities. I feel somewhat concerned. **(Moderate)**

**3** = More frequently present and disrupts my activities. I can only do fairly easy, simple things. I feel I need help. **(Severe)**

**4** = Almost always present. I can't perform at work, school or home because of it and I need help. **(Very Severe)**

## HOW DO I FEEL TODAY?

RATE ON A SCALE OF 0 4					
	0	1	2	3	4
Feeling dizzy					
Loss of balance					
Poor coordination, clumsy					
Headaches					
Nausea					
Vision problems, blurring, trouble seeing					
Sensitivity to light					
Hearing difficulty					
Sensitivity to noise					
Numbness or tingling on parts of my body					
Change in taste and/or smell					
Loss of appetite or increased appetite					
Poor concentration, can't pay attention, easily distracted					
Forgetfulness, can't remember things					
Difficulty making decisions					
Slowed thinking, difficulty getting organized, can't finish things					
Fatigue, loss of energy, getting tired easily					
Difficulty falling or staying asleep					
Feeling anxious or tense					
Feeling depressed or sad					
Irritability, easily annoyed					
Poor frustration tolerance, feeling easily overwhelmed by things					

## DAILY GUIDANCE

- Complete the table on the previous page every morning. If you rate your symptoms as None or Mild (0-1), then move on to the next stage.
- If any symptoms get worse or you develop new ones, immediately stop what you are doing and rest for the remainder of that day.
- If your symptoms go away or are rated as mild (0-1) the next morning, you may carefully try the activities that you were doing the day before. Make certain that you follow the guidelines closely and do a little less of the activity that caused your symptoms to worsen.
- If your symptoms are rated at 2 or higher on the NSI the next morning, go back to the last stage where you had no symptoms. Stay at that stage and contact your Primary Care Manager for further instructions.

## WHAT SHOULD I DO?

### After Mandatory 24 Hours of Recovery:

#### □ Stage 1: Rest

Rest or do very light activity for another 24 hours. Only do basic things like eating, using the bathroom, resting and sleeping.

- Keep your head above your heart (when you put on your shoes, bring your foot to your knee).
- Sit down when dressing and showering if needed.
- Walk on level surfaces at an easy pace.
- Limit head movements that cause symptoms.
- Stay in a quiet environment with low lighting.
- Watch periods of television with rest breaks each hour.
- Sleep as needed.
- Dress comfortably.

After this stage, see your primary care manager to discuss symptoms and determine next steps.

### DO NOT!

- work or study
- drink alcohol
- exercise
- drive
- hold your breath or grunt\*
- exert yourself to the point of making your heart race
- play video games

\*Pay attention to whether you are holding your breath when you bend over or are under stress.

#### □ Stage 2: Light Routine Activity

You may wear a uniform and boots.

May perform these activities no longer than 30 minutes:

- walk and stretch
- ride a stationary bike at a slow pace with low resistance
- no light housework
- use the computer
- play simple games, such as cards

### DO NOT!

- drink alcohol
- drive
- play video games
- do resistance training or repetitive lifting
- do sit-ups, push-ups or pull-ups
- go to crowded areas where you may be bumped into

### □ Stage 3: Light Occupation-oriented Activity

May perform these activities no longer than 60 minutes:

- lift and carry objects less than 20 pounds
- take a brisk walk
- ride in car and look around
- use an elliptical machine or stair climber
- perform light military tasks such as cleaning equipment

May perform these activities no longer than 30 minutes:

- shop for one item at the store
- talk to someone as you walk
- gently increase your exposure to light and noise
- perform a maintenance check on a vehicle

#### DO NOT!

- drink alcohol
- drive
- play video games
- do resistance training or repetitive lifting
- go to crowded places
- participate in combatives or contact sports

### □ Stage 4: Moderate Activity

You may wear personal protective equipment.

May perform these activities no longer than **90 minutes**:

- take a brisk walk
- do light resistance training
- participate in non-contact sports
- perform moderate job-related tasks
- climb, crawl or jog

May perform these activities no longer than 40 minutes:

- play video games, foosball, putting and ping pong
- play strategy games such as chess or sudoku
- shop for groceries
- perform target practice
- drive in a simulator

#### DO NOT!

- drink alcohol
- participate in combatives or contact sports
- drive

### □ Stage 5: Intensive Activity

- Resume normal routine and exercise.
- Participate in normal military, training and social activities.
- Use night vision goggles, take part in simulations, or be exposed to bright light.

See your primary care manager in the morning after completing this stage to complete exertional testing.

- Start driving again.
- Do heavy job-related tasks, such as digging.
- Communicate by signals during patrol duty or use radio communication.

#### DO NOT!

- drink alcohol
- participate in combatives or contact sports
- go outside the wire in a combat zone

### □ Stage 6: Unrestricted Activity

- Return to pre-injury activities.



If your heart starts to race, immediately **STOP** what you are doing and rest.



Practice good sleep habits (get 7-8 hours)  
See Healthy Sleep fact sheet at [dvbic.dcoe.mil](http://dvbic.dcoe.mil).