
JOINT NOTICE

Authorization to resume sports activities following a mild TBI or concussion: Update regarding the participation of physiotherapists

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In Quebec, people who suffer mild traumatic brain injury (MTBI) or a concussion benefit from excellent treatment provided by health professionals. Ideally, according to current recommendations¹ medical assessments should be obtained to confirm the diagnosis of MTBI/concussion and, subsequently, to make a decision about resuming sport activities without restriction. However, obtaining timely and repeated assessments by a medical doctor with experience in MTBI/concussion within a few days can be difficult.

Physiotherapists are already trained

The Collège des médecins du Québec (CMQ) and the Ordre professionnel de la physiothérapie du Québec (OPPQ) specify that physiotherapists trained to assess and treat individuals suffering from concussions have the competencies required to:

- > rule out the recognized criteria justifying emergency medical assessment²;
- > initiate management of presumed MTBI/concussion episodes according to the recommendations in force³;
- > contribute to safe decisions regarding the authorization to resume sport activities that involve a risk of collision, falls or contact.

Prerequisites for TBI identification and management

The scope of physiotherapy practice enables these health professionals to recognize the criteria indicating a normal status of the neurological system and of the neck (cervical spine), two key elements that must be taken into consideration to identify and manage MTBI/concussion. In addition, these professionals must undertake

¹ Canadian Guideline on Concussion in Sport (<https://parachute.ca/en/professional-resource/concussion-collection/canadian-guideline-on-concussion-in-sport/>)

² Sport Concussion Assessment Tool 5 (SCAT5; English version) <http://www.sportphysio.ca/wp-content/uploads/SCAT-5.pdf> [page consulted 06-2020].

³ "Recommendations in force" refers to recommendations from the international Consensus statement on concussions in sport (for the version in force at the time of this publication, see: <https://bjsm.bmj.com/content/bjsports/51/11/838.full.pdf>; these recommendations are revised every 4 years and the publication of the next update is expected during the course of 2021) and their contextual adaptation in the Canadian Guideline on Concussion in Sport¹ or the Concussion Management Protocol from the Ministère de l'Éducation et de l'Enseignement supérieur du Québec

continuous professional development activities in this area⁴ and have a practice profile that regularly exposes them to this health problem. Finally, the involvement of physiotherapists in MTBI/concussion identification and return to sport decisions should be limited to situations where they are already involved in the care of a patient⁵.

When and how to authorize a return to activities associated with a risk of injury?

In cases where clinical healing is observed without persistent symptoms⁶ of MTBI/concussion, the CMQ and the OPPQ consider that physiotherapists trained in the assessment and treatment of MTBI/concussion can authorize their patient to resume activities that involve risks without restrictions, once they deem their patient's condition permits. However, in MTBI/concussion cases with persistent symptoms, an individualized, multidisciplinary approach is recommended. Namely, in these cases, a decision by a medical doctor should be obtained prior to resuming activities associated with a risk of new injury⁷. A medical opinion should also be obtained in the presence of comorbidity (example: a learning disability), when a concussion occurred within the preceding year, or a history of two or more concussions is documented.

In the case of a decision to return to sports, a written recommendation provided by health professionals must document all relevant criteria that led to a favourable decision to resume sport activities. To do so, the use of the tool developed by the Association québécoise des médecins du sport et de l'exercice to help doctors and physiotherapists document and provide such decisions is recommended⁸.

The CMQ and the OPPQ are of the opinion that physiotherapists, when already involved in the care of a patient⁹, can initiate safe practices¹⁰ on the basis of detecting a presumed MTIB/concussion¹¹ and provide some of the recommendations about resuming sports without restriction. This will benefit both, the patients and the healthcare system.

⁴ According to the international recommendations in the Consensus statement on concussions in sport, professionals must participate in training in this area at an interval not exceeding 4 years.

⁵ The notion "already involved in the care of a patient" refers to the longitudinal implication of the physiotherapist in a setting where a concussion management protocol has been implemented (ex: being involved as a therapist for a school or sport organization).

⁶ "Persistent symptoms" is defined as more than 2 weeks for an adult and more than 4 weeks for a children or adolescent.

⁷ See previous page, note 3.

⁸ AQMSE, Medical recommendation about resuming unrestricted training activities following a concussion.

<https://aqmse.org/wp-content/uploads/2019/02/aqmseautorisation-medicale-eng.pdf> [page consulted 06-2020].

⁹ See note 5.

¹⁰ INESSS, Mild craniocerebral trauma (concussion): Advice for gradually resuming intellectual, physical and sports activities, August 2018 https://www.inesss.qc.ca/fileadmin/doc/INESSS/Rapports/Traumatologie/INESSS_pamphlet_Mild-traumatic-brain-injury.pdf [page consulted 06-2020].

¹¹ See previous page, note 2.