



MEDICAL CONCUSSION CLEARANCE FORM

This form is to be provided to the student or the parents/guardians of a student under 18 years of age who has completed Stage 3 of the Return to Learn (RTL) and Return to Physical Activity (RTPA) plan. A student must be medically cleared by a physician/nurse practitioner prior to moving on to Stage 4 of the Return to Learn (RTL) and Return to Physical Activity (RTPA) plan.

Note: Forms completed by other licensed healthcare professionals will not be otherwise accepted.

Student Name: _____ **Date:** _____

I have examined the above-named student and confirm that they are medically cleared to participate in the following activities:

- Full participation in learning activities (Return to Learn – Stage 4)
- Participation in physical activities that include skill progression/training drills and activities with low-risk of body contact (Return to Physical Activity – Stage 4)

Comments: _____

Physician/Nurse Practitioner

Name:
(Please print) _____

Signature: _____

Date: _____

A student who has received Medical Clearance and experiences a recurrence of symptoms or new symptoms appear, must immediately remove themselves from play, inform their parents/guardians/ teacher/coach/trainer/supervisor or volunteer and return to the physician/nurse practitioner for reassessment before returning to physical activity.

The information provided on this form is collected pursuant to the Board's education responsibilities as set out in the Education Act and its regulations. This information is protected under the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA) and will be utilized only for the purpose of managing student learning and well-being. Access to this information will be limited to those who have an administrative need, to the student to whom the information relates and the parent(s)/guardian (s) of a student who is under 18 years of age. Any questions with respect to this information should be directed to the school principal.

In accordance with the Municipal Freedom of Information and Protection of Privacy Act this information will be used solely to assess the student's Return to Learn and Return to Physical Activity. The form will be retained in the student's Ontario Student Record [OSR] for 5 years after the student graduates. The Ministry of Education may also request school reports on concussion activity. If you have any questions or concerns about the collection of information on this form, please contact the school principal.