Algorithm 12.1
Return-to-Work Considerations

< 72 Hours
- Immediate period of rest to prompt recovery.
- Avoid activities that increase the risk for another concussion/mTBI.
- No bed rest exceeding 3 days.

> 72 Hours
Gradual return to activity as tolerated.

Do the patient's normal work activities involve significant physical demands?

Yes
Exertion testing can be done (e.g., graduated treadmill exercise test).

Does this cause a return of symptoms?

No
Return to work as tolerated.

Yes
Return to work as tolerated.

Is there a high risk of injury/re-injury or any other safety concerns regarding work?

No
Return to work as tolerated.

Yes
Refer to specialists for in-depth vocational evaluation (Appendix 12.1) involving:
- Assessment of person
- Occupational and job demands
- Work environment
- Environmental supports
- Facilitators and barriers to successful return

Is the individual experiencing persistent symptoms or is unable to successfully resume pre-injury work duties?

No
Continued to monitor progressive return to work.

Yes
Does the evaluation by specialists determine that return to work is possible?

No
Consider referral to a structured program that promotes community integration (e.g., volunteer work).

Yes
A more in-depth assessment of symptoms and necessary work accommodations and restrictions should be identified (Sidebar 1).

Sidebar 1: Work Accommodations and Restrictions
Work restrictions should apply if:
- A work-specific task cannot be completed
- The work environment cannot be adapted
- Deficits cannot be accommodated
- Symptoms recur

Examples of Modifications:
- Length of work day
- Gradual work re-entry
- Additional time for tasks
- Change of job
- Environmental modifications

For a narrative description and guideline recommendations related to this algorithm, please refer to Section 12.