



OUTIL DE SENSIBILISATION AUX COMMOTIONS CÉRÉBRALES



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CONCUSSION AWARENESS
TRAINING TOOL



BC INJURY research and
prevention unit

Outil de sensibilisation aux commotions cérébrales (CATT)

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QU'EST-CE QUE l'outil de sensibilisation aux commotions cérébrales ?



Outil de sensibilisation aux commotions cérébrales (CATT)

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- Créé pour combler un manque de connaissances parmi différents publics il y a dix ans
- Analyse approfondie de l'environnement au niveau mondial pour voir ce qui existe déjà
- Groupes de discussion avec différents publics
 - La connaissance et la compréhension varient selon le public (selon qui vous êtes, ce que vous devez savoir est très différent)



Outil de sensibilisation aux commotions cérébrales (CATT)

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- Outil pédagogique avec des ressources pertinentes
- Modèle centré sur l'apprenant
- Fondé sur les données probantes
 - **N'A PAS** réinventé la roue
- Révision et mise à jour trimestrielles
- Évalué
- Disponible 24 heures sur 24, 7 jours sur 7
- Gratuit



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Recent News

- ATHLETE | CONCUSSION | EDUCATION MODULE | RETURN TO SCHOOL**
May 8, 2021
Has your institution mandated CATT for Athletes?
If you are interested in mandating CATT for your sports organization, please contact us.
- ATHLETE | GENERAL**
April 26, 2021
CATT wins Gold at International Safety Media Awards
We are proud to announce that the CATT website won Gold in the 2020 International Safety Media Awards! SMA honours exceptional safety media from around the world. Categories include Print...
- ATHLETE | GENERAL**
February 20, 2021
New concussion course educates athletes about concussion symptoms and management
CATT for Athletes includes a 30-minute, video-based course delivered in an interactive and engaging format. It provides detailed information on

Social Media

- cattonline @cattonline**
Children with a concussion should limit screen time. Learn to recognize, respond, manage, and prevent concussions with our free e-learning course. <https://bit.ly/3Kz0z1M> #RightToHealth #HealthTech #BrainInjury @OMC@aim-health @CCH-Research <https://bit.ly/3u069dC>
- cattonline @cattonline**
CATT for Medical Professionals is based upon the established principles of the Consensus Statement on Concussion in Sport and designed to provide you with the info you need to provide evidence-based care for your concussion patients. <https://bit.ly/3u069dC> @CCH-RI @OMC@aim-health <https://bit.ly/3u069dC>
- cattonline @cattonline**
CATT for Medical Professionals is designed to teach you the skills you need to provide evidence-based care for your concussion patients. [Learn more at www.cattonline.com](https://bit.ly/3u069dC)

Concussion Awareness Training Tool

Understand and manage concussions to reduce long-term health consequences and brain damage.

I want to learn more about concussions as a...

Medical Professional **Coach** **Parent or Caregiver** **School Professional** **Athlete** **Workers & Workplace** **Women's Support Worker** **Youth**

Need to assess a concussion?

A concussion is a type of brain injury usually caused by direct impacts or motion to the head or the body. Timely concussion recognition and management may decrease...



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À QUI le CATT
s'adresse-t-il?



CONCUSSION AWARENESS
TRAINING TOOL



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- CATT pour les professionnels de la santé (2013, mis à jour en 2018, mars 2024)
- CATT pour les entraîneurs (2014, mis à jour en décembre 2019, mars 2024)
- CATT pour les parents (2014, mis à jour en décembre 2019, avril 2024)
- CATT pour les professionnels scolaires (2016, mis à jour en septembre 2019, mars 2024)
- CATT pour les travailleurs et lieux de travail (lancé en juin 2019, avril 2024)
- CATT pour la violence entre partenaires intimes (lancé en septembre 2020, été 2024*)
- CATT pour les athlètes de haut niveau - université (février 2021, avril 2024)
- CATT pour les élèves du secondaire (août 2021, avril 2024)

- ✓ Reconnu au niveau provincial, national et international
- ✓ Mandaté par les écoles, les associations sportives et les universités dans tout le pays et dans le monde entier



Ressources

Resources

Resources

- 2023 **CATT Return to Work/Concussion Pathway Flip Card (For Adults)**
Concussion Awareness Training Tool (CATT)
- 2023 **CATT Return to School/Sport Flip Card**
BC Injury Research and Prevention Unit (BCIRPU)
- 2023 **Concussion Information Package for Women's Support Workers**
Concussion Awareness Training Tool (CATT)
- 2023 **Concussion Information Package for School Professionals**
Concussion Awareness Training Tool (CATT)
- 2023 **Concussion Information Package for Parents/Caregivers**
Concussion Awareness Training Tool (CATT)
- 2023 **Concussion Information Package for Coaches**
Concussion Awareness Training Tool (CATT)
- 2023 **Concussion Information Package for Motion Picture, Film, and Live Performance Workers**
Concussion Awareness Training Tool (CATT)
- 2023 **Concussion Information Package for Athletes**
Concussion Awareness Training Tool (CATT)
- 2023 **Concussion Information Package for Medical Professionals**
Concussion Awareness Training Tool (CATT)
- 2023 **Concussion Information Package for Workers and Workplaces**
Concussion Awareness Training Tool (CATT)
- 2023 **What You Need to Know About Concussion**
Concussion Awareness Training Tool (CATT)
- 2023 **Student Return to Learn Plan**
Concussion Awareness Training Tool (CATT)
- 2023 **Concussion Pathway for the Motion Picture, Film, & Live Performance Industries**
Concussion Awareness Training Tool (CATT)
- 2023 **Concussion Pathway**
Concussion Awareness Training Tool (CATT)
- 2023 **Concussion Pathway for Neurodivergent Students and Students with Disabilities**
Concussion Awareness Training Tool (CATT)

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A selection of CATT print resources are available to order. View our catalogue and fill out an order form.

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Looking for a specific resource? Try searching for key words or use the filters below.

E.g. Mental health

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Date Title

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- School Profes...
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Topics

- Clinical
- General Inform...
- Management
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- Return to Activ...
- Return to Scho...
- Return to Spor...
- Return to Wor...
- School
- Sports

Region

- All
- Canada
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- USA

Type



Ressources

Return to School

This tool is a guideline for managing a student's return to school following a concussion and does not replace medical advice. Every concussion is unique, and recovery is very different for each individual. Timelines and activities may vary based on direction from a doctor, nurse practitioner, or licensed healthcare professional with relevant training. Note: For information about returning to activities that pose risk of head contact, please refer to Return to School or Return to Activity.

STEP 1:	STEP 2:	STEP 3:	STEP 4:
Activities of daily living and relative rest* <ul style="list-style-type: none"> Maximum of 24-48 hours Activities at home such as social interactions and light walking that do not result in more than mild and brief** exacerbation (worsening) of concussion symptoms. Examples: <ul style="list-style-type: none"> Preparing meals Housework Light Minimize hours following concussion Avoid driving after a concussion 	School activities (as tolerated) <ul style="list-style-type: none"> Returning to school as soon as possible (as tolerated) is encouraged. Reading or other cognitive activities at school or at home. Goal: Increase tolerance to cognitive work, and connect socially with peers. Take breaks and adapt activities if concussion symptom exacerbation (worsening) is more than mild and brief**. 	Part-time or full-time days at school with accommodations (if needed) <ul style="list-style-type: none"> Gradually reintroduce schoolwork. May require accommodations, such as: <ul style="list-style-type: none"> Partial school days with access to breaks throughout the day Academic accommodations (extra time to complete work, reduced workload) to tolerate the classroom or school environment. 	Return to school full-time <p>Return to full days at school and academic activities without requiring accommodations (related to the concussion).</p> <p>Note: Medical clearance is NOT required to return to school</p> <p>For returning to PE, or sports, please refer to Return to Sport protocol.</p>

Return to Work

This tool is a guideline for managing an individual's return to work following a concussion and does not replace medical advice. Every concussion is unique, and recovery is very different for each individual. Timelines and activities may vary based on direction from a doctor, nurse practitioner, or licensed healthcare professional with relevant training. It is important to get medical clearance before returning to high-risk activities.

STEP 1:	STEP 2:	STEP 3:	STEP 4:
Activities of daily living and relative rest* <ul style="list-style-type: none"> Maximum of 24-48 hours Activities at home such as social interactions and light walking that do not result in more than mild and brief** exacerbation (worsening) of concussion symptoms. Examples: <ul style="list-style-type: none"> Preparing meals Housework Light walking Minimize screen time for first 24-48 hours following concussion. Avoid driving during the first 24-48 hours after a concussion. <p>Contact workplace to discuss a tailored Return to Work plan.</p>	Work activities (at work, as tolerated) <ul style="list-style-type: none"> Medically unnecessary delays in Return to Work should be avoided. Individuals are encouraged to remain at, or promptly return to, some form of productive work, provided it does not pose risk of re-injury. Reading or other cognitive activities at school or at home. Take breaks and adapt activities if concussion symptom exacerbation (worsening) is more than mild and brief**. Use of devices with screens may be gradually resumed, as tolerated. 	Part-time or full-time days at work with accommodations (if needed) <ul style="list-style-type: none"> Gradually reintroduce work activities, according to your graduated return to work plan. May require accommodations, such as: <ul style="list-style-type: none"> Partial work days with access to breaks throughout the day Extra time for tasks Access to a quiet, distraction-free work environment Gradually reduce accommodations and increase workload until full days without concussion-related accommodations are tolerated. Accommodations can be phased out in "trial" periods, to ensure that they are no longer needed. 	Return to work full-time <p>Return to full days at work with accommodations (related to the concussion).</p> <p>Note: Only return to job duties that have safety implications for you (e.g., operating heavy equipment from heights) when cleared by a nurse practitioner, or licensed healthcare professional.</p>
<p>After a maximum of 24-48 hours after injury, BEGIN STEP 2</p>	<p>If able to tolerate work with accommodations, BEGIN STEP 3</p>	<p>If can tolerate full days without concussion related accommodations, BEGIN STEP 4</p>	<p>Return to Work completed</p>
<p>Activities of daily living, as tolerated</p>	<p>Increase tolerance to work-related activities and connect social with peers/colleagues.</p>	<p>Gradually reduce accommodations and increase workload</p>	<p>Full workload (no accommodation related to the concussion)</p>

Returning to work is an individual process. In some instances workers may return to regular duties, while others may need accommodations or placement in a completely different job function. Progression through the strategy may be slowed when there is more than a mild and brief symptom exacerbation**. Therefore, each program should be individually prescribed and should support the reintegration and rehabilitation of the person with the injury or disability back into the workplace. Written determination of medical clearance should be provided before full Return to Work, as required by workplaces or occupational health and safety organizations.

Driving should resume after consultation with a doctor, nurse practitioner, or healthcare professional. Progression through the strategy may be slowed when there is more than a mild and brief symptom exacerbation**.

*Relative rest: activities of daily living including walking and other light physical and cognitive activities are permitted as tolerated.

Mild exacerbation (worsening) of symptoms: No more than a 2-point increase when compared with the pre-activity value on a 0-10-point symptom severity scale.*"Brief" exacerbation of symptoms: Worsening of symptoms for up to 1 hour.

****0-10 point symptom severity scale: Please see the Visual Analog Scale for an example of a 0-10 symptom severity scale.

Return to Activity

This tool is intended for a general audience and serves as a guideline for managing an individual's return to activity following a concussion and does not replace medical advice. Timelines and activities may vary based on direction from a doctor, nurse practitioner, or healthcare professional with relevant training. Begin Step 1 within 24 hours of injury, with progression through each subsequent step taking a minimum of 24 hours.

STEP 1:	STEP 2:	STEP 3:	STEP 4:
Activities of daily living and relative rest* <ul style="list-style-type: none"> Maximum of 24-48 hours Activities at home such as social interactions and light walking that do not result in more than mild and brief** exacerbation (worsening) of concussion symptoms. Examples: <ul style="list-style-type: none"> Preparing meals Housework Light walking Minimize screen time hours following concussion Sleep as much as you can while trying to maintain night sleeping schedule Avoid driving during hours after a concussion 	2A: Light effort aerobic activity <ul style="list-style-type: none"> Up to approximately 55% of maximum heart rate (predicted according to age - i.e. 220-age). In a safe and controlled environment, engage in light effort aerobic activity. Examples: <ul style="list-style-type: none"> Stationary cycling Walking at slow to brisk pace Gardening 	2B: Moderate effort aerobic activity <ul style="list-style-type: none"> Up to approximately 70% of maximum heart rate (predicted according to age - i.e. 220-age). Examples: <ul style="list-style-type: none"> Workouts Exercises and activities that do not result in more than mild and brief** exacerbation (worsening) of concussion symptoms and do not have a high risk of head impact. 	Increase activity intensity <ul style="list-style-type: none"> Participate in normal day-to-day activities, including normal physical/training activities, school gym-class, and work-related activities. Examples: <ul style="list-style-type: none"> Swimming Fast-paced walking Showering
<p>After a maximum of 24-48 hours after injury, BEGIN STEP 1</p>	<p>If can tolerate moderate aerobic exercise, BEGIN STEP 2</p>	<p>If medically cleared and have fully returned to school, BEGIN STEP 3</p>	<p>Return to activity</p> <p>Back to normal, unrestricted activity</p> <ul style="list-style-type: none"> Examples: <ul style="list-style-type: none"> Outdoor biking Paddling and water activities Normal unrestricted work-related tasks and higher risk activities School gym class No restrictions on physical activities

Return to Sport

This tool is a guideline for managing an individual's return to sport following a concussion and does not replace medical advice. Timelines and activities may vary based on direction from a doctor, nurse practitioner, or licensed healthcare professional with relevant training. Begin Step 1 within 24 hours of injury, with progression through each subsequent step taking a minimum of 24 hours.

STEP 1:	STEP 2:	STEP 3:	STEP 4:	STEP 5:	STEP 6:
Activities of daily living and relative rest* <ul style="list-style-type: none"> Maximum of 24-48 hours Activities at home such as social interactions and light walking that do not result in more than mild and brief** exacerbation (worsening) of concussion symptoms. Examples: <ul style="list-style-type: none"> Preparing meals Housework Light walking Minimize screen time for first 24-48 hours following concussion. 	2A: Light effort aerobic exercise <ul style="list-style-type: none"> Up to approximately 55% of maximum heart rate (predicted according to age - i.e. 220-age). In a safe and controlled environment, engage in light aerobic exercise. Examples: <ul style="list-style-type: none"> Stationary cycling Walking at slow to medium pace Light resistance training that does not result in more than mild and brief** exacerbation (worsening) of concussion symptoms. 	2B: Moderate effort aerobic exercise <ul style="list-style-type: none"> Up to approximately 70% of maximum heart rate (predicted according to age - i.e. 220-age). Take a break and modify activities as needed with the aim of gradually increasing tolerance and the intensity of aerobic activities. 	Individual sport-specific activities (that do not have a risk of inadvertent head impact) <ul style="list-style-type: none"> Addition of individual sport-specific activities that are supervised by a teacher/coach/parent. Examples: <ul style="list-style-type: none"> Skating drills (hockey) Running drills (soccer) Change of direction drills Individual gym class activities 	Non-contact training drills and activities <ul style="list-style-type: none"> Progress to exercises at high intensity, including more challenging drills and activities. Examples: <ul style="list-style-type: none"> Passing drills Multi-player training Supervised non-contact gym class activities Practices without body contact 	Return to all non-competitive activities <ul style="list-style-type: none"> Return to all non-competitive activities, all gym class activities, and full-contact practices Participate in higher-risk activities including normal training activities, all school gym-class activities, and full-contact sports practices and scrimmages. Avoid competitive game play.
<p>After a maximum of 24-48 hours after injury, BEGIN STEP 1</p>	<p>If can tolerate moderate aerobic exercise, BEGIN STEP 2</p>	<p>If medically cleared and have fully returned to school, BEGIN STEP 3</p>	<p>If can tolerate usual intensity of activities, BEGIN STEP 4</p>	<p>If can tolerate non-competitive, high-risk activities, BEGIN STEP 5</p>	<p>If can tolerate non-competitive, high-risk activities, BEGIN STEP 6</p>
<p>Activities of daily living, as tolerated</p>	<p>Increase heart rate</p>	<p>Increase intensity of aerobic activities and introduce low-risk sport-specific movements and changing of directions</p>	<p>Resume usual intensity of exercise, coordination, and activity-related cognitive skills</p>	<p>Return to activities that have a risk of falling or body contact, restore game-play confidence, and have coaches assess functional skills.</p>	<p>Note: Returning to full contact, competitive play or high-risk activities before you have recovered increases the risk of delayed recovery and for sustaining another more severe concussion or serious injury.</p>

If more than mild exacerbation (worsening) of symptoms (i.e., more than 2 points on a 0-10 scale****) occurs during Steps 1-3, stop the activity, and attempt to exercise the next day. Individuals experiencing concussion symptoms during Steps 4-6 should return to Step 3 to establish full resolution of symptoms with exertion before engaging in at-risk activities. Written determination of medical clearance should be provided before unrestricted Return to Sport as directed by local laws and/or sporting regulations.

*Relative rest: activities of daily living including walking and other light physical and cognitive activities are permitted as tolerated.

Mild exacerbation (worsening) of symptoms: No more than a 2-point increase when compared with the pre-activity value on a 0-10-point symptom severity scale.*"Brief" exacerbation of symptoms: Worsening of symptoms for up to 1 hour.

****0-10 point symptom severity scale: Please see the Visual Analog Scale for an example of a 0-10 symptom severity scale.



Ressources



CATT | CONCUSSION AWARENESS TRAINING TOOL

Concussion Resources for
Medical Professionals



Concussion Resources for
School Professionals



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Concussion Resources for
Parents & Caregivers



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CATT | CONCUSSION AWARENESS TRAINING TOOL

Concussion Resources for
Athletes



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Concussion Resources for
Coaches



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Concussion Resources for
Women's Support Workers



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Stratégies d'application des connaissances pour l'outil de formation à la sensibilisation aux commotions cérébrales (CATT)

BÂTIR DES RELATIONS



Développé en relation avec plus de

150 organismes et
partenaires



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Les modules électroniques CATT
ont été complétés plus de

145,000 fois
par des gens de plus de 50 pays



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ÉCOLES

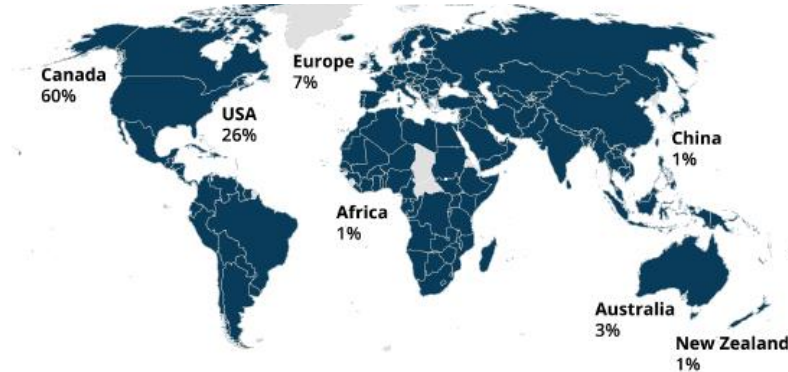
200+

apparitions à la
télévision, à la radio et
dans les messages
d'intérêt public



Statistiques du site Web CATT
1^{er} janvier 2018 – 16 janvier 2024

Origines des visiteurs les plus courantes



Plus de 2
millions
de visites



plus de
300 000
visiteurs



Hausse moyenne des
visites quotidiennes de
161%



209
pays/territoires



Plus de 140 000
cours complétés



109
Mandats de cours

www.cattonline.com

Data: Google Analytics, Icons from Freepik.



Campagne de marketing social



Outlining the Invisible: Experiences and Perspectives Regarding Concussion Recovery, Return-to-Work, and Resource Gaps
 @Stacy-Karnez, @Maha-Tarima-Baker, @Stacy-Karnez, @Stacy-Karnez
 1 British Columbia Health Research Institute, University of British Columbia, Vancouver, BC V6T 1Z6, Canada
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Delivering Evidence-Based Online Concussion Education to Medical and Healthcare Professionals: The Concussion Awareness Training Tool (CATT)
 @Maha-Tarima-Baker, @Stacy-Karnez, @Maha-Tarima-Baker, @Stacy-Karnez, @Stacy-Karnez
 Authors: Saffar, Karnez, Turcato, Katz, Babul, Sheline
 Source: Health Behavior and Policy Review, Volume 8, Number 3, May 2021, pp. 257-268(12)
 Publisher: Sage School Publishing Ltd
 DOI: https://doi.org/10.1177/10497315211018313

Collaboration, Training and Resources to Support School Policy Development and Recovery from Concussion
 Authors: Saffar, Karnez, Turcato, Katz, Babul, Sheline
 Source: Health Behavior and Policy Review, Volume 8, Number 3, May 2021, pp. 257-268(12)
 Publisher: Sage School Publishing Ltd
 DOI: https://doi.org/10.1177/10497315211018313

Stakeholder Recommendations to Increase the Accessibility of Online Health Information for Adults Experiencing Concussion Symptoms
 @Christina-Baker, @Daphne-Hardy, @Shelina-Babul, @Christina-Baker
 PLoS ONE 2021, 16(5):e0241003. doi:10.1371/journal.pone.0241003
 PMID: 33905488 | PMCID: PMC7929003 | DOI: 10.1371/journal.pone.0241003
 Free PMC article

Abstract
 Background: Concussion is a global public health problem in Canada, necessitating an understanding of the top reasons for workplace time loss. Concussion results in physical, cognitive, and/or emotional symptoms that temporarily prevent some with physical and mental health, such as working.

Annals of Sports Medicine and Research
Concussion Awareness and Education among Sports Resource Providers in Uganda: Piloting the Concussion Awareness Training Tool (CATT)
 @Maha-Tarima-Baker, @Stacy-Karnez, @Maha-Tarima-Baker, @Stacy-Karnez, @Stacy-Karnez
 Source: Annals of Sports Medicine and Research, Volume 10, Number 1, 2022, pp. 1-10
 Publisher: Annals of Sports Medicine and Research
 DOI: https://doi.org/10.1177/10497315211018313



● Collaborations internationales

★ Afrique du Sud



● Japon

● Liban

● Pakistan

● Afrique de l'Est (Nairobi / Dar es Salaam / Kampala)

1 47,532



Plans pour 2024+

- Lancement de la nouvelle plateforme le 1^{er} avril 2024
- Engagement auprès des communautés rurales et isolées
- Para Sport
- Peuples autochtones
 - Indigenous Sport, Recreation and Physical Activity Council (ISPARC)
 - Programme Brainwaves dans les écoles comptant le plus grand nombre d'élèves autochtones



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Merci!

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