

Student Name: _____

Date: _____

Symptom Targeted Academic Management Plan (STAMP)

Below, please see the symptoms they are currently experiencing. To promote recovery, the student will be provided with the following classroom accommodations that support their academic learning and performance:

Symptom (check)	Functional school problem	Accommodation/ management strategy (select)
Cognitive Symptoms		
Attention & concentration difficulties	Short focus on lecture, classwork, homework	<input type="checkbox"/> Shorter assignments (odd/even problems, requiring outline or bullet points instead of full written responses) <input type="checkbox"/> Break down tasks and tests into chunks/segments <input type="checkbox"/> Lighter work load: Max. nightly homework (including studying): ____ min
Working memory (short-term memory)	Trouble holding instructions, lecture, reading material, thoughts in mind during tasks	<input type="checkbox"/> Repetition <input type="checkbox"/> Written instructions <input type="checkbox"/> Provide student with teacher generated class notes
Memory consolidation/ retrieval	Retaining new information Accessing learned information	<input type="checkbox"/> Smaller chunks/segments to learn, repetition <input type="checkbox"/> Recognition cues
Processing speed	Unable to keep pace with work load Slower reading/writing/calculation Difficulty processing verbal information effectively	<input type="checkbox"/> Allowances for extended time to complete coursework, assignments, tests <input type="checkbox"/> Reduce/slowdown verbal information and check for comprehension
Cognitive Fatigue/ Fogginess	Decreased arousal, mental energy; trouble thinking clearly, formulating thoughts	<input type="checkbox"/> Rest breaks during classes <input type="checkbox"/> Homework, and examinations in quiet location
Physical Symptoms		
Headaches	Interferes with concentration Increased irritability	<input type="checkbox"/> Intersperse rest breaks, shortened day if symptom does not subside <input type="checkbox"/> Allow for short naps in quiet location (e.g., nurse's office)
Light/ noise sensitivity	Symptoms worsen in bright or loud environments	<input type="checkbox"/> Wear sunglasses/hat, seating away from bright sunlight <input type="checkbox"/> Limit exposure to SMART board, computers, provide class notes <input type="checkbox"/> Avoid noisy/crowded environments such as lunchroom, assemblies, chorus/music class, and hallways. Leave class early. <input type="checkbox"/> Allow student to wear earplugs as needed
Dizziness/ balance/ nausea	Unsteadiness when walking Nausea or vomiting	<input type="checkbox"/> Elevator pass <input type="checkbox"/> Class transition before bell
Sleep disturbance	Decreased arousal, shifted sleep schedule, trouble falling asleep	<input type="checkbox"/> Later start time <input type="checkbox"/> Shortened day or rest breaks
Fatigue	Lack of energy	<input type="checkbox"/> Periodic rest breaks, short naps in quiet location <input type="checkbox"/> Passive participation
Emotional Symptoms		
Irritability	Poor tolerance for stress	<input type="checkbox"/> Reduce stimulation and stressors (e.g., overwhelmed with missing work)
Anxiety/ nervousness	Worried about falling behind, pushing through symptoms	<input type="checkbox"/> Reassurance from teachers and team about accommodations, workload reduction, alternate forms of testing <input type="checkbox"/> Time built in for socialization
Depression/ withdrawal	Withdrawal from school or friends because of stigma or activity restrictions	<input type="checkbox"/> Allow student to be engaged with peers during selected low stress/ extracurricular activities as tolerated <input type="checkbox"/> Lunch in a quiet room with friends
Specific Academic Recommendations		
Subject specific difficulties	Writing	<input type="checkbox"/> Provide alternatives to written output (word bank, oral response, etc.)
	Mathematics calculation	<input type="checkbox"/> Use of calculator, reduced number of problems
	Reading comprehension	<input type="checkbox"/> Shorter reading passages <input type="checkbox"/> Provide tools to assist with visual tracking or comprehension of information (e.g., use of audio books)
Make-up/Missing work	Trouble managing current load of make-up work	<input type="checkbox"/> Waive previously missed work <input type="checkbox"/> Reduce amount of outstanding work (assign essential learning tasks)
Tests/quizzes	Unprepared for tests/quizzes	<input type="checkbox"/> No/ Modified classroom testing (e.g., breaks, extra time, quiet location) <input type="checkbox"/> Limit number of classroom tests per day. _____ per day.
Other:		

