



Tool to Identify a Suspected Concussion

This tool is to be used as a quick reference in helping to identify a suspected concussion. In all cases of a suspected concussion, the student must be examined by a medical doctor or nurse practitioner for diagnosis and must follow Concussion Management Procedures – Return to Learn and Return to Physical Activity.

An incident occurred involving (student/athlete name) _____ (date) _____

He/She was observed for signs and symptoms of a concussion: (CHECK APPROPRIATE BOX)

- ☐ No signs or symptoms described below were noted at the time. Note: Continued monitoring of the student is important as signs and symptoms of a concussion may appear hours later
- ☐ The following signs were observed or symptoms reported:

Following a blow to the head, face or neck, or a blow to the body that transmits a force to the head, a concussion must be suspected in the presence of any one or more of the following signs or symptoms (check all observed or reported symptoms that apply).

Signs and Symptoms of Suspected Concussion		
RED FLAGS <i>Call 911 if you observe any of the following</i>	POSSIBLE SIGNS OBSERVED <i>A sign is a visual clue that is observed by another person (e.g. parent/ guardian, teacher, coach, supervisor, peer).</i>	POSSIBLE SYMPTOMS REPORTED <i>A symptom is something the student will feel/ report.</i>
○ Neck pain or tenderness ○ Double vision ○ Weakness or tingling/ burning in arms or legs ○ Severe or increasing headache ○ Seizure or convulsion ○ Loss of conscious state ○ Vomiting ○ Increasingly restless, agitate, or combative	○ Lying motionless (no loss of consciousness) ○ Slow to get up after a direct hit or indirect hit to the head ○ Disorientation or confusion, or an inability to respond appropriately to questions (<i>see Quick Memory Function Assessment on p. 2</i>) ○ Blank or vacant look ○ Balance, gait difficulties, motor incoordination, stumbling, slow laboured movements ○ Facial injury after trauma	○ Headache ○ "Pressure in head" ○ Balance problems ○ Nausea or vomiting ○ Drowsiness ○ Dizziness ○ Blurred vision ○ Sensitivity to light ○ Sensitivity to noise ○ Fatigue or low energy ○ "Don't feel right"/ feeling off ○ More emotional ○ More irritable ○ Sadness ○ Nervous or anxious ○ Neck pain ○ Difficulty concentrating ○ Difficulty remembering ○ Feeling slowed down ○ Feeling dazed or "in a fog"
If any observed signs or symptoms worsen, call 911		

Do not administer any medication (unless the student requires medication for other conditions, for example, insulin for diabetes, inhaler for asthma).

Quick Memory Function Assessment – Failure to answer any of these questions correctly may indicate a concussion:

What room are we in now?

Answer: _____

What activity/sport/game are we playing now?

Answer: _____

What field are we playing on today?

Answer: _____

What part of the day is it?

Answer: _____

What is the name of your teacher/coach?

Answer: _____

What school do you go to?

Answer: _____

If there are any signs observed or symptoms reported, or if the student fails to answer any of the above questions correctly, a concussion should be suspected, and the student must be immediately feeling better. Students with a suspected concussion should not be left alone and must not leave the premises without parent/guardian (or emergency contact) supervision.

In all cases of a suspected concussion, the student must be examined by a medical doctor or nurse practitioner for a diagnosis.

Continued Monitoring

Students should be monitored for 24-48 hours following the incident as signs and symptoms can appear immediately after the injury or may take hours or days to emerge. If any signs or symptoms emerge, the student needs to be examined by a medical doctor or nurse practitioner.

Teacher Name: _____

Signature: _____

Date: _____

This form must be copied, with the original filed as per school board policy and the copy provided to parent/guardian