**CONCUSSION WORKFLOW DIAGRAM**

KU Pediatrics, 2016

1. **Patient with suspected concussion**
   - Complete Concussion Symptoms Checklist
     - Do this at EVERY visit (located in doc flowsheets)
   - Do Concussion Physical Exam at EVERY visit
   - Diagnose Concussion, put diagnosis in problem list.
     - Modify problem overview with stage of progress at EVERY visit.
     - Educate patient/family about concussion
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     - Provide graduated return to school guidelines.
     - Restrict from all play/sports at this time.
   - Evaluate if patient able to return to school.
   - Schedule 1 wk f/u to reassess.
   - Patient to call clinic when fully back to school without symptoms.
   - Educate parents. Provide return to play guidelines.
   - Opt to examine patient again prior to sports clearance. Schedule 1-2 wk f/u.
   - Reliable parents and/or trainer, opt to sign sports clearance after parents call with no symptoms.
   - Sign sports clearance (MD/DO)
   - Consider referral to concussion clinic.
   - 2-4 week follow up after clearance. Ensure no further symptoms or problems. Resolve concussion diagnosis.

2. **< 2 WKS, NO SXS**
   - Assess patient, consider referral to concussion clinic
   - Examine patient, assess symptoms. Consider referral to concussion clinic
   - < 2 WKS, SXS
   - Schedule 1 wk f/u to reassess. Patient to call clinic when fully back to school without symptoms.
   - Evaluate if patient able to return to school.
   - Schedule 1 wk f/u to reassess.
   - > 2 WKS, + SXS
   - Assess patient for return to school
   - Refer to concussion clinic.
   - Instruct on home care, limit cognitive activity. Schedule f/u 2-3 days.

3. **< 1 WK out of school**
   - Assess patient for return to school
   - Refer to concussion clinic.

4. **> 1 WK out of school**
   - Assess patient for return to school
   - Refer to concussion clinic.

*If patient is ever NOT improving on follow up, consider referral to concussion clinic.
*If symptoms ever worsen on follow-up, refer to concussion clinic.
*Consider referral for patients with co-morbid complex, chronic medical conditions.
*Refer patients with history of multiple concussions as management is more complex.
*If not fully recovered without symptoms within 1 month of accident, refer to concussion clinic.