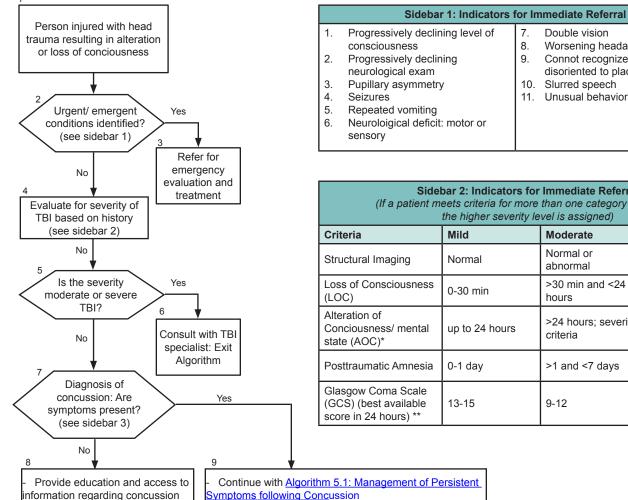
Algorithm 2.1

Initial Management of Symptoms Following Concussion*

A. Module A: Initial Presentation (>7 Days Post-injury)



			_			
Sidebar 2: Indicators for Immediate Referral (If a patient meets criteria for more than one category of severity, the higher severity level is assigned)						
Criteria	Mild	Moderate	Severe			
Structural Imaging	Normal	Normal or abnormal	Normal or abnormal			
Loss of Consciousness (LOC)	0-30 min	>30 min and <24 hours	>24 hours			
Alteration of Conciousness/ mental state (AOC)*	up to 24 hours	>24 hours; severity criteria	y based on other			
Posttraumatic Amnesia	0-1 day	>1 and <7 days	>7 days			
Glasgow Coma Scale (GCS) (best available	13-15	9-12	<9			

Double vision

Worsening headache

disoriented to place

Slurred speech

11. Unusual behavior

Connot recognize people or

Behavior/ Emotional Symptoms: Depression, anxiety, agitation,

irritability, impulsivity, aggression

- Follow-up as indicated	brain injury environmen	t	_	
Sidebar 3: Possible Post-Concussion Related Symptoms***				
Physical Symptoms:		Cognitive Symptoms:	E	
Headache, dizziness, balance disor	rders, nausea, fatique.	Problems with attention.	1 [

*Alteration of mental status must be immediately related to the trauma to the head. Typical symptoms would be: looking and feeling dazed and uncertain of what is happening, confusion, difficulty thinking clearly or responding appropriately to mental status questions, and being unable to describe events immediately before or after the trauma event.

concentration, memory, speed of

processing, judgement, executive

**In April 2015, the DoD released a memorandum recommending against the use of GCS scores to diagnose TBI. See the memorendum for more

Refer for comprehensive evaluation to a specialized

control

***Symptoms that may develop withing 30 days post-injury.

sleep disturbance, blurred vision, sensitivity to light, hearing

neurological abnormalities, numbness, tingling, neck pain

difficulties/loss, tinnitus, sensitivity to noise, seizure, transient

(Appendix 1.4) Provide usual care

^{*} Adapted from the VA/DoD Management of Concussion/Mild Traumatic Brain Injury Clinical Practice Guideline (VA/DoD, 2016).