

# 4

## General Recommendations Regarding Diagnosis/Assessment of Prolonged Symptoms

### What are prolonged symptoms?

A prolonged symptom can be a variety of physical, cognitive, emotional, and behavioral symptoms that last longer than 3 months. Most people with concussion/mTBI recover quickly; but recovery will be different from person to person. About 15% of people who have had a concussion/mTBI can still have symptoms 3 months later.

In Section 2, it was mentioned that your primary healthcare provider should see you in the first 1-2 weeks after the concussion/mTBI. In addition, they should see you again as needed to:

- Monitor your symptoms
- Observe your medical history and activities that may affect how you recover
- Guide you to manage your symptoms
- Make referrals to other healthcare providers as needed
- Encourage you to gradually return to your activities and not wait to be symptom-free for return to all activities
- Explain how to pace yourself with activities before symptoms return

### How can prolonged symptoms affect me?

Prolonged symptoms can affect a person's daily life, relationships with others, and ability to get back to usual activities. Because of this, prolonged symptoms need to be closely monitored. The approach taken for each patient will be different.

### Your primary care provider may do the following:

- Re-assess your symptoms and do more physical exams
- Ask about mental or social factors that might be affecting your health
- Review your prescribed and over the counter medications/supplements, use of alcohol and/or marijuana, or other drugs
- Continue to determine if your symptoms are from the concussion or from something else
- May refer you to other healthcare providers to manage specific symptoms that require specialized assessment and/or treatment

**Note:** Previously the term “persistent” was used instead of “prolonged”. In other information that you find, you may see the two being used interchangeably.



## Key Guideline Recommendations for Healthcare Providers

The following key guideline recommendations for healthcare providers have been included here so you can see what the guideline recommends healthcare providers do in assessing and treating patients after concussion/mTBI.

4.1	After a brief period of rest during the acute phase (24-48 hours) after injury, patients can be encouraged to become gradually and progressively more active as tolerated (i.e., activity level should not bring on or worsen their symptoms)
-----	---

## Additional Resources

Information to bring to your family Doctor/Primary Care Provider

<https://braininjuryguidelines.org/concussion/fileadmin/media/information-to-bring-to-your-family-doctor-primary-care-provider.pdf>

Patient Care Pathway

<http://concussionsontario.org/wp-content/uploads/2018/04/ONF-PatientPathway-Tearaway-WEB-1.pdf>

Parkwood Pacing Graphs

<https://braininjuryguidelines.org/concussion/fileadmin/media/appendices/appendix-2-2.pdf>

Appointment tracker

<https://braininjuryguidelines.org/concussion/fileadmin/media/appointment-tracker.pdf>



## Cautionary Note to Users

The content of the *Guideline for Concussion/mTBI & Prolonged Symptoms, 3rd Edition: for Adults over 18 years*, is based on the status of scientific knowledge available at the time of their finalization (2017) as well as on the consensus of the experts who participated in the guideline development.

This guideline has been created to provide recommendations and help with management of concussion/mild traumatic brain injury (mTBI). It is only for management for adults over 18 years of age. This guideline is not intended for use by people who have sustained or are suspected of having sustained a concussion/mTBI for any self-diagnosis or treatment.

The guideline can be used by patients when speaking with healthcare providers about their care. It covers getting a diagnosis, managing symptoms in the early phase (acute) and management in the longer recovery phase (prolonged symptoms). Patients may wish to bring their healthcare and other providers' attention to this guideline. It is based on up-to-date, quality research evidence, the expertise of providers and the input of patients.

