



TOOL 8.1: Post-concussion Mental Health Considerations Algorithm

Medical follow-up and referral to healthcare professionals/interdisciplinary concussion team

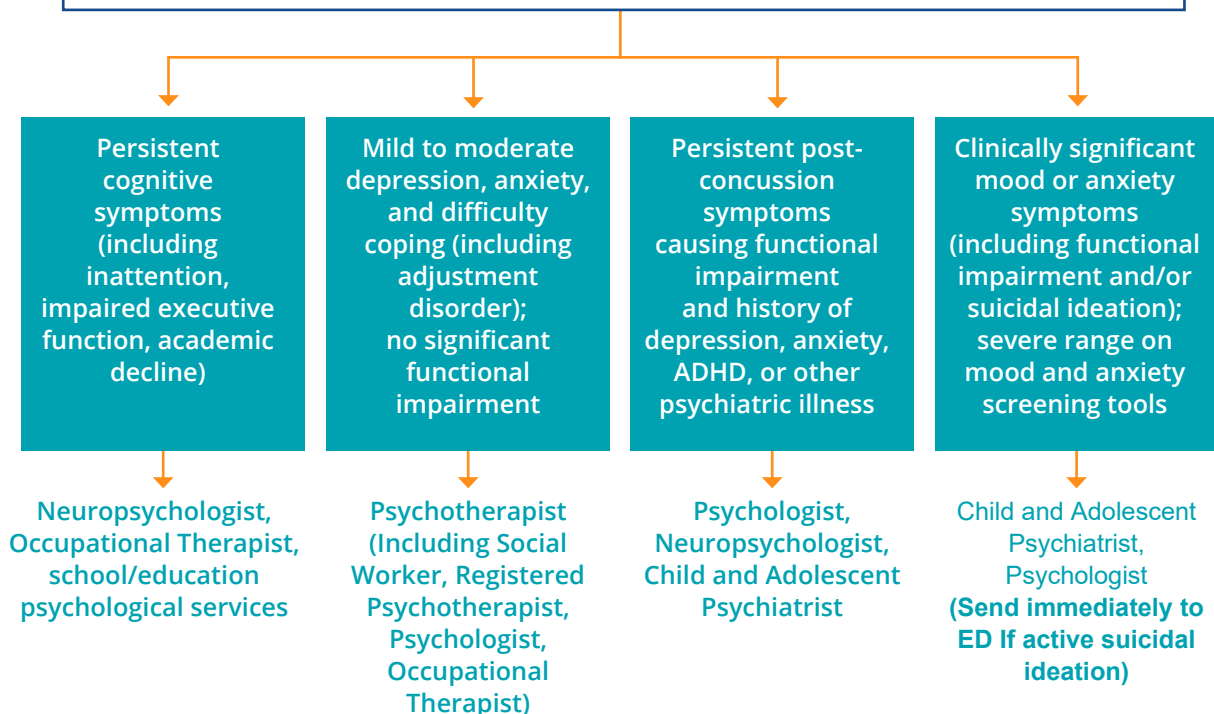
(1-4 weeks following acute injury)

- Focused clinical history, physical examination, determine need for imaging
- Screen for possible complicating factors that may impede recovery e.g. previous mental illness, family history of mental illness, migraine, current stress level, and any other modifiers that may delay recovery. Consider early referral to specialist or interdisciplinary team.
- Screen for mood, anxiety, and cognitive symptoms
- Send immediately to the emergency department (ED) if active suicidal ideation
- Review pre-injury mental health status (including pre-injury symptoms or diagnoses of depression, anxiety disorders, ADHD, and behavior disturbances)
- Review previous school history (attendance, learning, behavior) using information from school records if possible
- Post-injury education and guidance on symptom management (including advice regarding pacing of activities and general recovery expectations within the context of pre-existing circumstances)
- Refer to healthcare professionals/interdisciplinary concussion team if symptoms last longer than 4 weeks (or sooner as needed/using clinical judgment)

Consider early referral (< 4 weeks) if child/adolescent has modifiers that may delay recovery/high risk of prolonged post-concussion symptoms

Not yet recovered Symptoms lasting > 4 weeks post-concussion

Specialist or interdisciplinary concussion team



Acronyms: attention deficit hyperactivity disorder (ADHD)

