

**Table 1. Signs and symptoms of concussion<sup>4</sup>**

PHYSICAL	COGNITIVE	EMOTIONAL	SLEEP
Headache	Feeling mentally “foggy”	Irritability	Drowsiness
Nausea	Feeling slowed down	Sadness	Sleeping more than usual
Vomiting	Difficulty concentrating	More emotional	Sleeping less than usual
Balance problems	Difficulty remembering	Nervousness	Difficulty falling asleep
Visual problems	Forgetful of recent information		
Fatigue	Confused about recent events		
Sensitivity to light	Answers questions slowly		
Sensitivity to noise	Repeats questions		
Dazed			
Stunned			

**Table 2. Indications for transport to an emergency facility<sup>4</sup>**

Repeated vomiting  
 Severe or progressively worsening headache  
 Seizure activity  
 Unsteady gait  
 Slurred speech  
 Weakness or numbness in the extremities  
 Signs of basilar skull fracture  
 Altered mental status  
 Glasgow coma scale < 15

**Table 3. Indications for neuroimaging<sup>4</sup>**

Severe headache  
 Seizures  
 Focal neurological findings  
 Repeated emesis  
 Significant drowsiness/difficulty awakening  
 Slurred speech  
 Poor orientation to person/place/time  
 Neck pain  
 Significant irritability  
 Hx LOC > 30 seconds

**Table 4. Return to schoolwork progression<sup>6</sup>**

Cognitive rest	No school/work, homework, texting, video games, computer work
Relative rest	Reintroduce short periods (5–15 minutes) of aforementioned activities that do not trigger severe symptom exacerbation
Homework/work at home	Longer periods of cognitive activity (20–30 minutes) to build stamina, avoiding triggering severe symptoms
Return to school/work	Partial-day school/work with accommodations after tolerating 1–2 cumulative hours of homework at home
Ramp up to full day	With accommodations for full work load, limited make up work
Full return to schoolwork	Full day, full work load, fully caught up with make up load

**Table 5. Return to play progression<sup>6</sup>**

Physical rest	Encourage healthy sleep, additional sleep may be needed, no activities that result in sustained increased heart rate or breaking a sweat or severe symptom exacerbation
Light activity associated with everyday life avoiding triggering severe symptoms	Walking
Light aerobic exercise	Brisk walking, light jogging to increase heart rate without triggering severe symptom exacerbation
Sport-specific aerobic exercise	Noncontact skating, dribbling, or running drills as tolerated
	Advance to complex noncontact sport-specific training drills and add resistance training as tolerated
After medical clearance	Full contact practice
	Normal game play