

Date _____

Today _____ received an injury to the head and was observed.
(Student's Name)

DESCRIPTION OF HOW INJURY OCCURRED

SIGNS OBSERVED BY SCHOOL PERSONNEL

- Appears dazed or stunned
- Answers questions slowly
- Can't recall events *prior* to the hit, bump, or fall
- Loses consciousness (even briefly)
- Is confused about events
- Repeats questions
- Can't recall events *after* the hit, bump, or fall
- Shows behavior or personality changes

SYMPTOMS REPORTED BY THE STUDENT

Thinking/Remembering:

- Difficulty thinking clearly
- Difficulty concentrating or remembering
- Feeling more slowed down
- Feeling sluggish, hazy, foggy, or groggy

Emotional:

- Irritable
- Sad
- More emotional than usual
- Nervous

Physical:

- Headache or "pressure" in head
- Nausea or vomiting
- Balance problems or dizziness
- Fatigue or feeling tired
- Blurry or double vision
- Sensitivity to light or noise
- Numbness or tingling
- Does not "feel right"

Sleep*:

- Drowsy
- Sleeps *less* than usual
- Sleeps *more* than usual
- Has trouble falling asleep

**Only ask about sleep symptoms if the injury occurred
On a prior day*

Students who experience *one or more* of the signs and symptoms listed below after a bump, blow, or jolt to the head or body should be referred to a health care professional experienced in evaluating for concussion.

There is no one single indicator for concussion. Rather, recognizing a concussion requires a symptom assessment. The signs and symptoms of concussion can take time to appear and can become more noticeable during concentration and learning activities in the classroom. Seek medical attention if you see changes in how the student is acting or feeling, if symptoms become worse, or if the student just "doesn't feel right."

Contact Person & Title

Date

Phone Number

Copies to: _____ Parent _____ Nurse _____ Trainer