### SCREENING AND DIAGNOSIS

<table>
<thead>
<tr>
<th>Grades of Recommendation</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A (strong evidence)</strong></td>
<td>Must: benefits substantially outweigh harms; Should: benefits moderately outweigh harms; May: benefits minimally outweigh harms or benefit-harm ratio is value dependent; Should not: harms minimally or moderately outweigh benefits or evidence of no effect; Must not: harms largely outweigh benefits</td>
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<tr>
<td><strong>B (moderate evidence)</strong></td>
<td>Should: benefits substantially outweigh harms; May: benefits moderately or minimally outweigh harms or benefit-harm ratio is value dependent; Should not: evidence that harms outweigh benefits or evidence of no effect</td>
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<tr>
<td>◊ <strong>C (weak evidence)</strong></td>
<td>Should: benefits substantially outweigh harms; May: benefits moderately or minimally outweigh harms or benefit-harm ratio is value dependent; Should not: harms minimally or moderately outweigh benefits</td>
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<tr>
<td>◊ <strong>D (conflicting evidence)</strong></td>
<td>May: conflicting evidence; the benefit-harm ratio is value dependent</td>
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<td>◊ E (Theoretical/Foundational)</td>
<td>May: in the absence of evidence from clinical studies, theoretical and/or foundational evidence supports benefit; Should not: in the absence of evidence from clinical studies, theoretical and/or foundational evidence suggests risk of harms</td>
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<tr>
<td>◊ F (Expert Opinion)</td>
<td>Must: strongly supported by consensus-based best practice/standard of care; Should: moderately supported by best practice/standard of care; May: supported by expert opinion in the absence of consensus; Should not: best practice/standard of care indicates potential harms; Must not: potential harms are strongly supported by consensus-based best practice/standard of care</td>
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### DIAGNOSIS

Physical therapist **must screen** all individuals and document the presence of absence of symptoms, impairments, and functional limitations that may relate to a concussive event.

- **Level of Evidence**: A
- **Patient Presentation**: Experienced a potential concussive event.

### SCREENING FOR INDICATORS OF EMERGENCY CONDITIONS

Physical therapists **must screen** patients for signs of medical emergency or severe pathology (eg, more serious brain injury, medical conditions, or cervical spine injury) that warrant further evaluation by other health care providers. Referral for further evaluation should be made as indicated.

- **Level of Evidence**: A
- **Patient Presentation**: Experienced a potential concussive event.

### COMPREHENSIVE INTAKE INTERVIEW

Physical therapists **must conduct** and document a comprehensive intake of past medical history, review of mental health history, injury-related mechanisms, injury-related symptoms, and early management strategies.

- **Level of Evidence**: A
- **Patient Presentation**: Experienced a concussive event.

### DIFFERENTIAL DIAGNOSIS

Physical therapist **must evaluate** for potential signs and symptoms of an undiagnosed concussion. Evaluation should include triangulation of information from patient/family/witness reports, the patient’s past medical history, physical observation/examination, and the use of an age-appropriate symptom scale/checklist.

- **Level of Evidence**: A
- **Patient Presentation**: Experienced a concussive event but have not been diagnosed with concussion.

Physical therapists **should screen** patient for mental health, cognitive impairment, and other potential coinciding diagnoses and refer for additional evaluation and services as indicated.

- **Level of Evidence**: A
- **Patient Presentation**: Experienced a concussive event.

Physical therapists **should evaluate** for other potential diagnoses and follow standard-of care procedures in accordance with their findings.

- **Level of Evidence**: F
- **Patient Presentation**: Experienced a concussive event, do not report or demonstrate signs and symptoms consistent with a concussion diagnosis.
Physical therapists should determine whether a comprehensive physical therapy evaluation is appropriate using information from a comprehensive intake interview and clinical judgement.

∇ Level of Evidence: F

∇ Patient Presentation: Experienced a concussive event, report or demonstrate signs and symptoms consistent with concussion diagnosis.

Physical therapists should provide education regarding concussion symptoms, prognosis, and self-management strategies and refer for consultation with other health care providers as indicated.

∇ Level of Evidence: F

∇ Patient Presentation: Patients not deemed appropriate for a comprehensive physical therapy examination (ie, those who present with severe mental health concerns or health conditions that require medical clearance prior to comprehensive physical examination).