



FORM B (MEDICAL) CONCUSSION ASSESSMENT FORM



Date: _____

Player Name: _____

To whom it may concern,

Children and youth who sustain a suspected concussion should be managed according to the Canadian Guideline on Concussion in Sport. Accordingly, I have personally completed a Medical Assessment on this patient.

Results of Medical Assessment

- This patient has **not** been diagnosed with a concussion and can resume full participation in hockey activities without restriction.
- This patient has **not** been diagnosed with a concussion but the assessment led to the following diagnosis and recommendations:

- This patient has been diagnosed with a concussion.

If a concussion is diagnosed I would ask that the patient be allowed to participate in a step-wise Return-to-Sport as per the Canadian Guideline on Concussion in Sport.

The above patient **should not return to any full contact practices or games until the coach has been provided with a Concussion Clearance Letter provided by a medical doctor.**

Other comments:

Thank-you very much in advance for your understanding.

Yours Sincerely,

Signature/print _____ M.D.

McCrory P, et al. Consensus statement on concussion in sport: the 5th international conference on concussion in sport held in Berlin, Oct 2016. British Journal of Sports Medicine 2017 0:1-10.
Reed, N.*, Zemek, R.*, Dawson, J., Ledoux, AA., et al. (2019). Living Guideline for Diagnosing and Managing Pediatric Concussion. Toronto, ON: Ontario Neurotrauma Foundation



FORM C (MEDICAL) CONCUSSION CLEARANCE FORM



Concussion Date: _____ Player's Name: _____

To whom it may concern,

Individuals who are diagnosed with a concussion should be managed according to the Canadian Guideline on Concussion in Sport including the Return-to-Sport Strategy. Accordingly, the above individual has been medically cleared to participate in the following activities as tolerated (please check all that apply):

Stage 5: Full-contact hockey practice

Stage 6: Full return to hockey games

What if symptoms reoccur? Any individual who has been cleared for physical activities, gym class or non-contact practice, and who has a reoccurrence of symptoms, should immediately remove him or herself from the activity and inform the teacher or coach. If the symptoms subside, the individual may continue to participate in these activities as tolerated.

Individuals who have been cleared for full contact practice or game play must be able to participate in high intensity resistance and endurance exercise (including non-contact practice) without symptom recurrence (stages 1-4 of return-to-sport protocol).

Any individual who has been cleared for full-contact practice or full game play and has a recurrence of symptoms, should immediately remove him or herself from play, inform their coach, and undergo medical assessment by a medical doctor before returning to full-contact practice or games.

Any individual who returns to practices or games and sustains a new suspected concussion should seek medical assessment my medical doctor.

Other comments:

Thank you very much in advance for your understanding.

Yours Sincerely,

Signature/print _____

Name/Professional Designation _____

Source: PARACHUTE | Canadian Guideline on Concussion in Sport,

McCrory P, et al. Consensus statement on concussion in sport: the 5th international conference on concussion in sport held in Berlin, Oct 2016. British Journal of Sports Medicine 2017 0:1-10.

Reed, N.*, Zemek, R.*, Dawson, J., Ledoux, AA., et al. (2019). Living Guideline for Diagnosing and Managing Pediatric Concussion. Toronto, ON: Ontario Neurotrauma Foundation

Policy was developed in collaboration with the Concussion Centre from Holland Bloorview Kids Rehabilitation Hospital. Updated September 2022.