Step 1: Assess & Communicate

Head Injury Evaluation Tool Question 1) After a forceful blow to the head or to the body that resulted in rapid movement of the head, were any of the following observed? 1. Loss of consciousness (even a brief loss of consciousness should be taken seriously) 2. Repeated vomiting or nausea Yes to 1 or 3. Drowsiness or cannot be awakened more 4. Weakness, numbness, or decreased coordination No to all 9 **CALL 911** 5. Slurred speech 6. Difficulty recognizing people or places Continue with Student should 7. Increasing confusion, restlessness, or agitation Question 2. be seen by 8. Convulsions or seizures doctors **9.** One pupil (the black part in the middle of the eye) immediately larger than the other Question 2) Where one or more of these signs observed by staff immediately after the injury? 1. Appears dazed or stunned No to all 5 2. Is confused about events

Continue with
Question 3.

Answers questions slowly or repeats questions
4. Forgets events prior to injury, as expected for age
5. Forgets events after the injury, as expected for age

Questions 3) Were any of these symptoms observed or reported by student at any time?



8. Numbness or tingling Changes in Thinking, Memory, & Emotion

- 1. Feeling sluggish, foggy, slowed down
- 2. More difficulty concentrating
- 3. Acting irritable

home.

3. Student wearing

4. Advise student

symptoms.

to report any

warning sticker.

4. More emotional (inappropriately sad, nervous, or angry etc.)

Student should be sent home & be seen by a physician ASAP.

Yes to 1 or more

- Call student's guardians.
- Advise to send child to ER or primary care provider ASAP.
- 3. Fill out "Head Injury Response" form & give to guardians.