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## CONCUSSION QUESTIONNAIRE – TO BE COMPLETED BY PHYSICIAN

Player's Name:			Age:		
How many concussions has the player suffered? Please give dates of concussions.		Details:			
Indicate seriousness of concussions.		Details:			
Did the player suffer any loss of consciousness in any of the incidents?		Details:			
Detail the player's condition at the time of incident.		Details:			
Was the player hospitalized? If so, for how long.		Details:			
Did you prescribe any medication? If so, what was prescribed and what was the dosage.		Details:			
f yes, please pro	ovide results).				
What was the player's condition upon release.		Details:			
How many games did the player miss with each incident?		Details:			
ns suffered by	the player imme	diately following the inci	dent:		
□ Yes	□ No	Loss of Memory	□ Yes	□ No	
□ Yes	□ No	Ringing in Ears	□ Yes	□No	
□ Yes	□ No	Cognitive Changes	□ Yes	□ No	
		Language Difficulty	□ Yes	□ No	
1	ons.  of consciousne  at the time of ir  If so, for how I  ation? d what was the f yes, please pro ion upon releas yer miss with ex  ms suffered by  Pes  Yes	ons.  of consciousness in any of the at the time of incident.  If so, for how long.  ation? d what was the dosage.  f yes, please provide results).  ion upon release.  yer miss with each incident?  ms suffered by the player imme	ons.  Details:  of consciousness in any of the Details:  at the time of incident.  Details:  If so, for how long.  Details:  ation?  d what was the dosage.  f yes, please provide results).  ion upon release.  Details:  yer miss with each incident?  Details:  ms suffered by the player immediately following the incident:  Yes  No Ringing in Ears Yes No Cognitive Changes	ons.  Details:  of consciousness in any of the Details:  at the time of incident.  Details:  If so, for how long.  Details:  dion? d what was the dosage.  f yes, please provide results).  ion upon release.  Details:  Details:  per miss with each incident?  Details:  Details:  Details:  Output  Details:  Details:  Output  Details:  Per miss with each incident?  Details:  Output  Output  Details:  Output  Output  Output  Details:  Output  Outpu	