EVIDENCE REPOSITORIES

Evidence repositories are collections of best available resources and evidence (clinical guidelines, peer reviewed literature, systematic reviews, etc.), collated by our knowledge synthesis team and content advisors. This evidence repository is not intended to be an exhaustive list of resources for a topic, but rather a curated list of current, evidence-based resources, based on expert consensus of relevance and usability for a general emergency department setting. We search databases (Cochrane Library, PubMed, TRIP Database) and web search engines (Google, Google Scholar) to locate evidence. Additionally, hospital websites are browsed for guidance documents, such as clinical practice guidelines (CPG) for healthcare professionals.

Every effort is made to identify resources that are open access (i.e. publicly available, free of charge, not requiring a subscription).

More information about the creation of our evidence repositories can be found at <u>https://pubmed.ncbi.nlm.nih.gov/28537762/</u>

CONTENT TEAM

Thank you to the following content experts and Knowledge Synthesis team who led the development of this evidence repository.

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TREKK developed resources for healthcare providers and parents & families can be found here.

Clinical Guidelines

- 1. PedsConcussion. <u>Considerations for telemedicine and virtual care algorithm.</u> PedsConcussion. 2021.
- 2. PedsConcussion. <u>Telemedicine and virtual concussion care</u>. PedsConcussion. 2021.
- 3. PedsConcussion. Living guideline for pediatric concussion care. PedsConcussion. 2019.
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- 6. Velikonja D, Baldisera T, Bauman S, et al. <u>Standards for post-concussion care: From diagnosis to the</u> <u>interdisciplinary concussion clinic.</u> Ontario Neurotrauma Foundation. 2017.
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Overviews

1. Lynch W. Options for evaluating and tracking pediatric concussion. J Head Trauma Rehabil. 2018;33(5):354-61.

Systematic Reviews

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- 3. DeMatteo C, Bednar ED, Randall S, et al. <u>Effectiveness of return to activity and return to school protocols for</u> <u>children postconcussion: A systematic review.</u> BMJ Open Sport Exerc Med. 2020;6(1):e000667.
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- 5. Purcell LK, Davis GA, Gioia GA. <u>What factors must be considered in 'return to school' following concussion and</u> <u>what strategies or accommodations should be followed? A systematic review.</u> Br J Sports Med. 2019;53(4):250.
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- 9. Schmidt J, Hayward KS, Brown KE, et al. <u>Imaging in pediatric concussion: A systematic review.</u> Pediatrics. 2018;141(5).
- 10. Moser RS, Davis GA, Schatz P. <u>The age variable in childhood concussion management: A systematic review.</u> Arch Clin Neuropsychol. 2018;33(4):417-26.





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Key Studies

- 1. Podolak OE, Chaudhary S, Haarbauer-Krupa J, et al. <u>Characteristics of diagnosed concussions in children aged 0</u> to 4 years presenting to a large pediatric healthcare network. Pediatr Emerg Care. 2021;37(12):e1652-e7.
- 2. Root JM, Sady MD, Gai J, et al. Effect of cognitive and physical rest on persistent postconcussive symptoms following a pediatric head injury. J Pediatr. 2020;227:184-90.e4.
- 3. Patsimas T, Howell DR, Potter MN, et al. <u>Concussion-symptom rating correlation between pediatric patients and their parents.</u> J Athl Train. 2020;55(10):1020-6.
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- 8. Howell DR, O'Brien MJ, Fraser J, et al. <u>Continuing play, symptom severity, and symptom duration after</u> <u>concussion in youth athletes.</u> Clin J Sport Med. 2020;30 Suppl 1:S42-s6.
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Other Resources

- 1. Ontario Neurotrauma Foundation. <u>Management of acute symptoms algorithm.</u> PedsConcussion. 2021.
- 2. Centers for Disease Control and Prevention (CDC). <u>Heads up apps.</u> Centers for Disease Control and Prevention (CDC). 2021.





- 3. DeMatteo C, Randall S, Falla K, et al. <u>Concussion management for children has changed: New pediatric protocols</u> <u>using the latest evidence.</u> Clin Pediatr (Phila). 2020;59(1):5-20.
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- 5. Lynch W. Options for evaluating and tracking pediatric concussion. J Head Trauma Rehabil. 2018;33(5):354-61.
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