Concussion injuries were then subdivided into acute or PCS by time from injury to December 2019. Charts were identified by diagnostic code associated with concussion syndrome. How can we prevent progression? We gathered a large amount of data to evaluate acute concussion and PCS. Our findings of the incidence and presentation of PCS agree with the current literature. We next steps include further subgroup analyses and comparison of these results to the Complex Concussion Clinic pathway at the GSSMC.

**Demographics**
- Individuals who were female (RR=1.4) and/or ≥25 years of age (RR=3.6) were more likely to be diagnosed with PCS.

**RESULTS**

**Symptom Scores**
- Symptomology was assessed by utilizing scores from the Sport Concussion Assessment Tool (SCAT 3/5) which is completed each visit.
- For patients with PCS who had significantly higher initial total and symptom scores compared to Acute patients.

**Management Plans**
- Some form of therapy (referral, medication, intervention) was prescribed in 71.3% of all PCS visits, as compared to in 44.2% of acute concussion visits (p<0.05). We would like to acknowledge the Northern Alberta Academic, Family Medicine Fund and Alberta Innova in support.

**Tables**
- Table 1. Number and proportion of patients by age.
- Table 2. Top 3 referral providers for concussion patients.
- Table 3. Median patient wait-times for SMP referral and first visit. * indicates p<0.001 in the same row.
- Table 4. Proportion of patients who had imaging (X-ray, CT, MRI) in the same row.
- Table 5. Proportion of patients who had imaging ordered prior to SMP referral and/or by SMP at GSSMC visit(s). * indicates p<0.001 (X2=24.2).

**Figures**
- Figure 1. Proportion of patients by sex.
- Figure 2. Proportion of patients by number of previous concussions.
- Figure 3. Proportion of patients by age.
- Figure 4. Proportion of patients by sex.

**ACKNOWLEDGEMENTS**
We would like to acknowledge the Northern Alberta Academic, Family Medicine Fund and Alberta Innova in support. We would like to acknowledge the Northern Alberta Academic, Family Medicine Fund and Alberta Innova in support.