

Supplementary Table S1. Variables extracted from the psychiatry consult note, and their possible values.

<i>Variable name</i>	<i>Possible values</i>
<i>Demographics</i>	
Sex	Male (0); Female (1)
Age	11 - 19
<i>Injury details</i>	
Loss of consciousness	Loss of consciousness not mentioned (0) Loss of consciousness mentioned (1)
Visited Emergency Department (ED)	Visit(s) to the ED after injury not mentioned (0) Visit(s) to the ED after injury mentioned (1)
Mechanism of injury	Motor vehicle accident (MVA) (0, 1), Sports-related (0, 1) Fall (0, 1), Assault (0, 1), Other (0, 1)
<i>History</i>	
History of prior concussion(s)	Prior concussions not mentioned (0) Prior concussions mentioned (1)
History of ADHD	History of ADHD not mentioned (0) History of ADHD mentioned (1)
History of depression or anxiety	History of depression or anxiety not mentioned (0) History of depression or anxiety mentioned (1)
History of chronic pain or medically unexplained symptoms ¹	History of chronic pain and/or MUS not mentioned (0) History of chronic pain and/or MUS mentioned (1)
<i>Persistent symptoms after concussion</i>	
Atypical persistent symptoms after concussion	Symptoms not inventoried on the Rivermead post-concussion symptom questionnaire (RPQ) not mentioned (0) Mentions of any of the following symptoms not inventoried on the RPQ: neurological symptoms (sensory, motor, visual or cognitive), pain symptoms (excluding neck pain), other symptoms (1)
<i>Medical service use</i>	
Neuroimaging	CT scan and/or MRI done after injury not mentioned (0) CT scan and/or MRI done after injury mentioned (1)
Referring physician	General practitioner (0, 1), Pediatrician (0, 1), Neurologist (0, 1), Other (0, 1)
Number of health care providers	A count of the number of primary care providers, specialists, therapists, and alternative health care providers, mentioned as having been seen after the injury.
Number of prescription medications	A count of the number of prescription medications currently taken, mentioned in the consult note.
Months since injury at consult	The difference between the injury month and year, and the AC3 consult month and year.
<i>School attendance</i>	
School attendance post-injury	Attending school at a pre-injury level (0, 1); Attending school with accommodations, reduced hours or performance (0, 1); Not attending school (0, 1); Not mentioned (0, 1)

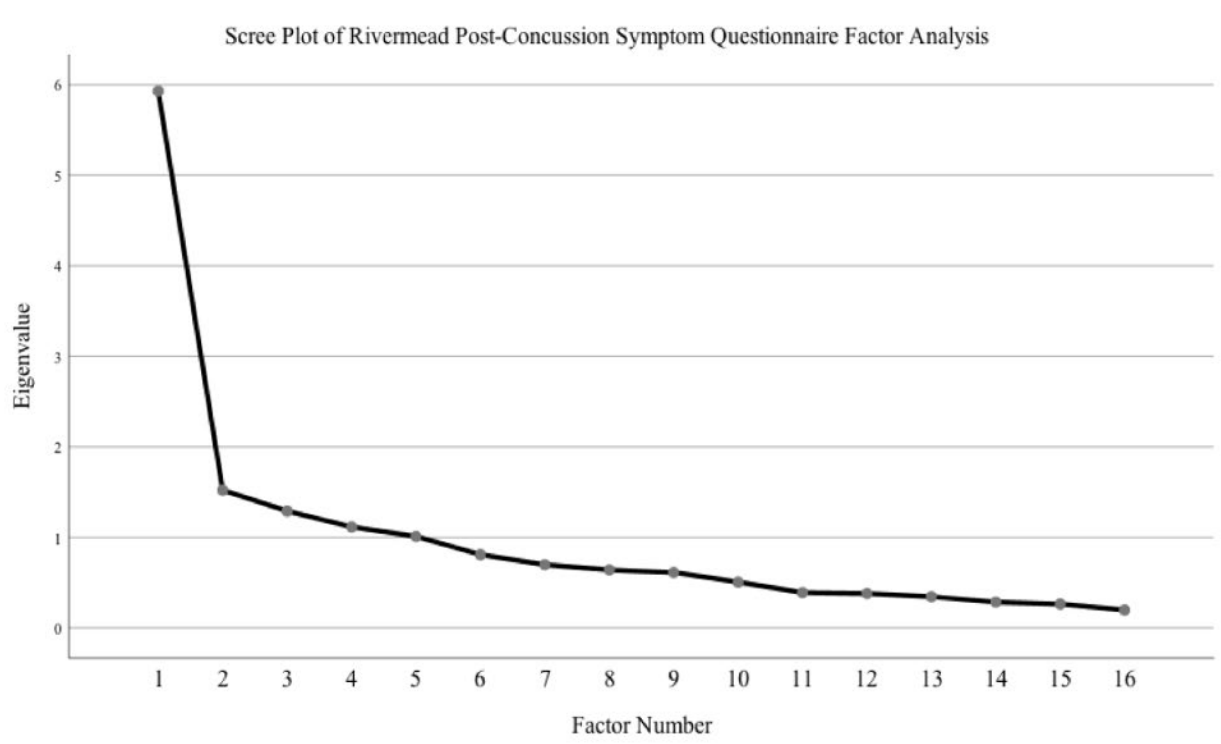
¹ This variable was collected as “History of conditions commonly affected by somatization”, which included chronic pain, medically unexplained symptoms, irritable bowel syndrome, fibromyalgia and chronic fatigue syndrome. However, adolescents in this sample only had chronic pain and medically unexplained symptoms, and the variable name was changed to reflect this.

Appendix S1

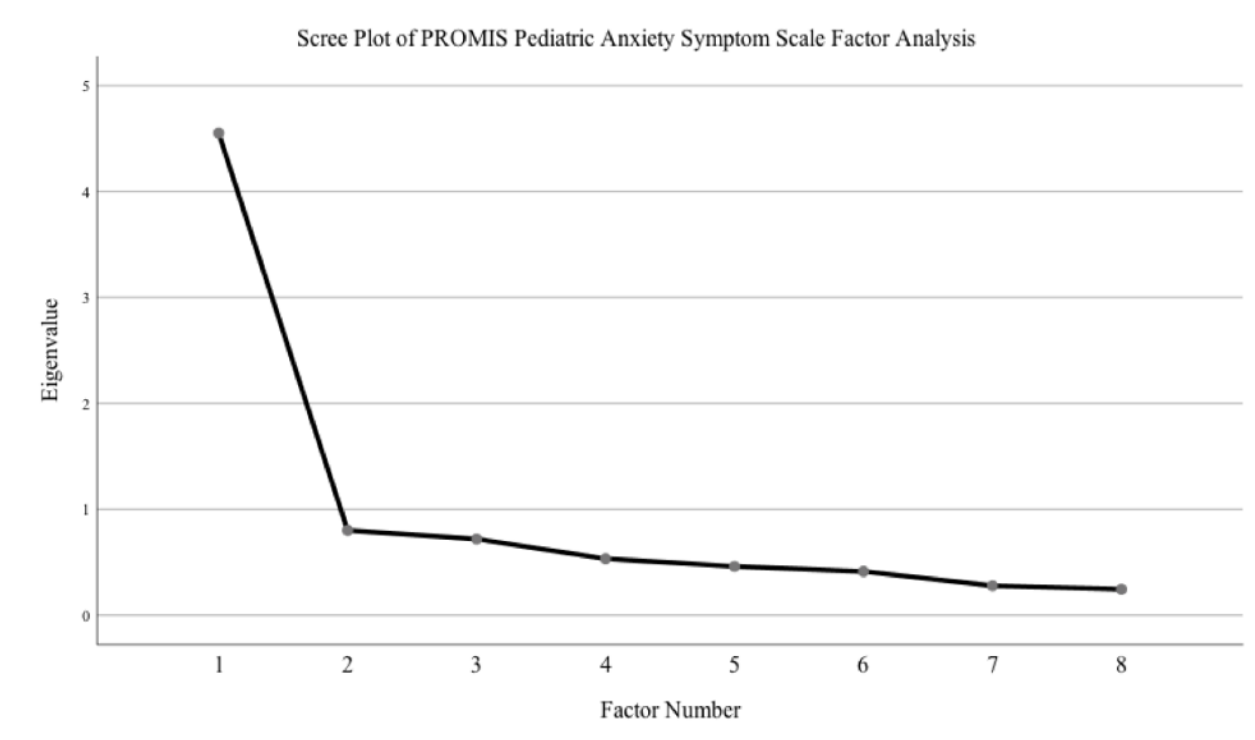
Supplementary Methods

When complete RPQ, PROMIS and KADS scales were missing, scores were not imputed, and records were dropped from all applicable analyses. A total of 7 records were missing complete RPQ scales, 10 were missing PROMIS scales and 9 were missing KADS scales. Records with missing scales did not differ from those with present scales on any demographic, injury, medical service use, or impairment variables. When up to three items were missing on an RPQ scale (8% of records), and up to one item was missing on a KADS scale (2% of records), individual mean imputation was used to impute missing item scores, a reliable method of imputing data for missing item scores, in the event that < 10% of total item responses in a sample are missing.¹ No data was imputed for PROMIS scales because no individual items for PROMIS scales were missing.

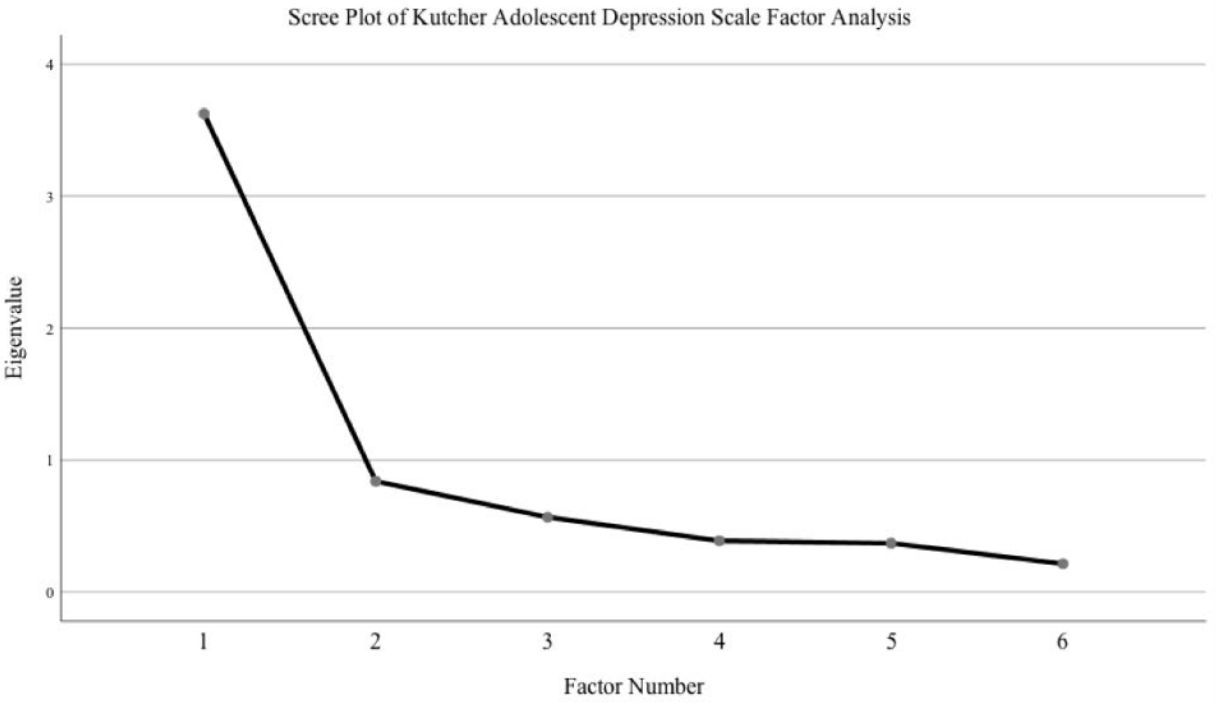
Supplementary Figure S1



Supplementary Figure S2



Supplementary Figure S3



Supplementary Figure S4

