

STANDARD ASSESSMENT OF CONCUSSION

BACKGROUND

NAME: _____ DATE: _____ GRADE: 9 10 11 12
 AGE: _____ GENDER: M F DOMINANT HAND: R L NONE
 How many concussions do you think you've had in the past? _____
 When? _____
 How long was your recovery from the most recent concussion? _____
 Have you ever been hospitalized or had medical imaging done for a head injury? Y N
 Have you ever been diagnosed with headaches or migraines? Y N
 Do you have a learning disability, dyslexia, ADD/ADHD? Y N
 Have you ever been diagnosed with depression, anxiety or any other psychiatric disorder? Y N
 Are you on any medications? If yes, please list: Y N

COGNITIVE ASSESSMENT

***Orientation** (1pt for each correct answer)

What month is it? 0 1
 What is the date today? 0 1
 What is the day of the week? 0 1
 What year is it? 0 1
 What time is it right now? (within 1hr) 0 1

| | |
|--------------------------|------------|
| <i>Orientation score</i> | _____ of 5 |
|--------------------------|------------|

***Immediate memory** "I am going to test your memory. I will read you a list of words and when I am done, repeat back as many words as you can remember, in any order"

| List | Trial 1 | Trial 2 | Trial 3 | Alternate word list |
|--------|---------|---------|---------|--|
| Elbow | 0 1 | 0 1 | 0 1 | candle baby finger |
| Apple | 0 1 | 0 1 | 0 1 | paper monkey penny |
| Carpet | 0 1 | 0 1 | 0 1 | sugar perfume blanket |
| Saddle | 0 1 | 0 1 | 0 1 | sandwich sunset lemon |
| Bubble | 0 1 | 0 1 | 0 1 | wagon iron insect |
| Total | | | | |

| | |
|-------------------------------------|-------------|
| <i>Immediate memory score total</i> | _____ of 15 |
|-------------------------------------|-------------|

***Concentration: Digits Backwards** "I am going to read you a string of numbers and when I am done, you repeat them back to me backwards, in reverse order of how I read them to you. For example, if I say 7-1-9, you would say 9-1-7"

| List | Trial 1 | Alternate Digit List | | |
|-------------|---------|----------------------|-------------|-------------|
| 4-9-3 | 0 1 | 6-2-9 | 5-2-6 | 4-1-5 |
| 3-8-1-4 | 0 1 | 3-2-7-9 | 1-7-9-5 | 4-9-6-8 |
| 6-2-9-7-1 | 0 1 | 1-5-2-8-6 | 3-8-5-2-7 | 6-1-8-4-3 |
| 7-1-8-4-6-2 | 0 1 | 5-3-9-1-4-8 | 8-3-1-9-6-4 | 7-2-4-8-5-6 |
| Total of 4 | | | | |

***Concentration: Months in Reverse Order** (1pt for entire sequence correct) "Now tell me the months of the year in reverse order. Start with the last month and go backward. So you'll say December, November... Go ahead"

Dec-Nov-Oct-Sept-Aug-Jul-Jun-May-Apr-Mar-Feb-Jan 0 1

| | |
|----------------------------|------------|
| <i>Concentration score</i> | _____ of 5 |
|----------------------------|------------|

STANDARD ASSESSMENT OF CONCUSSION

BALANCE ASSESSMENT

Positions:



I. Double leg stance: *“The first stance is standing with your feet together with your hands on your hips and with your eyes closed. You should try to maintain stability in that position for 20 seconds. I will be counting the number of times you move out of this position. I will start timing when you are set and have closed your eyes.”*

II: Single leg stance: *“If you were to kick a ball, which foot would you use? That is your dominant foot. Now stand on your non-dominant foot. The dominant leg should be held in approximately 30 degrees of hip flexion and 45 degrees of knee flexion. Again, you should try to maintain stability for 20 seconds with your hands on your hips and your eyes closed. I will be counting the number of times you move out of this position. If you stumble out of this position, open your eyes and return to the start position and continue balancing. I will start timing when you are set and have closed your eyes.”*

III: Tandem Stance: *“Now stand heel-to-toe with your non-dominant foot in back. Your weight should be evenly distributed across both feet. Again, you should try to maintain stability for 20 seconds with your hands on your hips and eyes closed. I will be counting the number of times you move out of this position. If you stumble out of this position, open your eyes and return to the start position and continue balancing. I will start timing when you are set and have closed your eyes.”*

Balance Examination Scoring

Which foot was tested? (i.e. which is the non-dominant foot)

Left Right

Footwear (shoes, barefoot, sandals, braces or tape, etc)

Recent injuries affecting or inhibiting testing?

Condition

I. Double leg stance

of Errors

II. Single leg stance (non dominant foot)

of Errors

III. Tandem stance (non dominant foot in back)

of Errors

(Total # of Errors) subtracted from 30 =

*Delayed Memory Recall

“Do you remember that list of words I read to you earlier? Tell me as many words from the list as you can remember in any order” Score 1 pt. for each correct response

Elbow-apple-carpet-saddle-bubble

candle-paper-sugar-sandwich-wagon

baby-monkey-perfume-sunset-iron

Finger-penny-blanket-lemon-insect

Delayed Memory Score Total:

Scoring Summary:

Orientation:

___/5

Immediate Memory:

___/15

SAC Total

___/30

Concentration:

___/5

Delayed Recall:

___/5

Balance Score:

___/30