

Base line Concussion Test	Name: _____ Date: _____ Age _____
Signs (circle) Appears dazed Behavioral changes Is confused Personality changes Is forgetful Poor pre-event recall Disoriented Poor post-event recall Moves clumsily Balance problems Answers slowly Light sensitivity Blacks out Noise sensitivity	Symptoms (circle) "WHEN IN DOUBT SIT THEM OUT" Headache Feeling tired/sluggish Head pressure Feeling groggy/foggy Dizziness Can't concentrate Nausea Confused Neck or upper back pain Feeling Sad/emotional Feeling nervous/anxious
Orientation 1. What month is it? 2. What is the date? 3. What day of the week? 4. What year is it? 5. What time do you think it is now?	Maddock Questions 1. Where are we? 2. What quarter is it right now? 3. Who scored last in the game? 4. Who did we play last game? 5. Did we win the last game?
Observation 1. Eyes blinking Mouth open 2. Able to smile / show emotion 3. Deteriorating mental status 4. Lack of focus / eyes wandering 5. Walking and counting backwards Grade 1 - Masked face, no facial expression, decreased blink Grade 2 - Masked Face, decreased blink, mouth not parted Grade 3 - Masked face, mouth open sometimes with questions Grade 4 - Masked face and less blinking, mouth open all the time	Cranial Nerves CN1 Smell Y N CN2 Sight Left WNL Right WNL CN3, 4 & 6 H test, Nystagmus, PEARLA Rt N or Ab Lt N or Ab CN5 Facial Sensation Rt N or Ab Lt N or Ab CN7 Facial Expression Squint/smile N Ab CN8 Vestibular Can they hear you N Ab CN9 & 10 Swallow N Ab CN11 Shrug, SCM N Ab CN12 Tongue N Ab
Short-Term Memory (APP) <i>Apple Brick Flag Cat Cheese</i>	Score: _____
Balance(APP) Double-leg stance on Wobble Disc Single-leg stance* on Wobble Disc Tandem stance*	Score: _____ Foot Touches: _____ Use non-dominant foot - in back R or L <i>10=perfect score - subtract points for error; opening eyes, hands off hips, moving out of test</i>
Reaction Time (APP) Ruler Test (cm)	Score: _____
Coordination(APP) Finger to Nose/ Finger to Finger to Nose Finger tapping, close hand, pronation supination, Toe tapping, heel tapping,	Score: _____ look for speed, amplitude, hesitation, halts 1 - 1-2 hesitations decrease amplitude at end 2 - 3-5 hesitations decreased in middle 3 - Over 5 hesitation start of reps 1 freeze 4 - Can't do it
Pattern Recognition(APP)	Score: _____
Problem Solving (APP)	Score: _____ Time: _____
Color Recognition(APP)	Score: _____ Time: _____
Impulse Control (APP)	Correct: _____ Incorrect: _____
Recall Memory (APP) <i>Apple Brick Flag Cat Cheese</i>	Score: _____
Focus <i>Repeat the numbers backwards</i> 4 9 3 3 8 1 4 6 2 9 7 1 7 1 8 4 6 2	Errors: _____ Months in reverse order Y or N position... Dec-Nov-Oct-Sep-Aug-Jul-Jun-May-Apr-Mar-Feb-Jan

Minnesota State High School League - Return to Play Protocol (24 hours between each step, if symptoms return to previous step)

Must have a signed note from a doctor/ chiropractor to return to full participation *step 5

CAN NOT RETURN TO PLAY ON THE SAME DAY OF CONCUSSION

1. No activity, complete rest until symptoms resolve.
2. Light aerobic exercise (walking, cycling)
3. Sport specific exercise, skating, running, swinging a bat
4. Non contact training drills
5. Full contact training *only with medical clearance note
6. Return to game play

Cleared to Return to play (step 5&6) ____ Y ____ N Signature _____