# Family Health Associates

## Concussion Clinic

(541) 567-6434

www.FHAcares.com


Symptom Inventory

Ages 5 — 11

Patient Name: _____ DOB: _____ Date: _____

Both parent and child must fill this form out

| Child Report | Not at all/ Never | A little/ Rarely | Somewhat/ Sometimes | A lot/ Often |
|---|---|---|---|---|
| I have headaches | 0 | 1 | 2 | 3 |
| I feel dizzy | 0 | 1 | 2 | 3 |
| I feel like the room is spinning | 0 | 1 | 2 | 3 |
| I feel like I'm going to faint | 0 | 1 | 2 | 3 |
| Things are blurry when I look at them | 0 | 1 | 2 | 3 |
| I see double | 0 | 1 | 2 | 3 |
| I feel sick to my stomach | 0 | 1 | 2 | 3 |
| My neck hurts | 0 | 1 | 2 | 3 |
| I get tired a lot | 0 | 1 | 2 | 3 |
| I get tired easily | 0 | 1 | 2 | 3 |
| I have trouble paying attention | 0 | 1 | 2 | 3 |
| I get distracted easily | 0 | 1 | 2 | 3 |
| I have a hard time concentrating | 0 | 1 | 2 | 3 |
| I have problems remembering what people tell me | 0 | 1 | 2 | 3 |
| I have problems following directions | 0 | 1 | 2 | 3 |
| I daydream too much | 0 | 1 | 2 | 3 |
| I get confused | 0 | 1 | 2 | 3 |
| I forget things | 0 | 1 | 2 | 3 |
| I have problems finishing things | 0 | 1 | 2 | 3 |
| I have trouble figuring things out | 0 | 1 | 2 | 3 |
| It's hard for me to learn new things | 0 | 1 | 2 | 3 |
| Total number of symptoms: | | | | of 21 |
| Symptom severity score: | | | | of 63 |
| Do the symptoms gets worse with physical activity? | | | Y | N |
| Do the symptoms get worse with trying to think? | | | Y | N |

| **Overall rating for child to answer:** | Very bad | | | | | | | | | Very Good |
|---|---|---|---|---|---|---|---|---|---|---|
| On a scale of 0 to 10 (where 10 is normal), how do you feel now? | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 |

If not 10, in what way do you feel different?:

| Parent Report<br>**The child:** | Not at all/ Never | A little/ Rarely | Somewhat/ Sometimes | A lot/ Often |
|---|---|---|---|---|
| Has headaches | 0 | 1 | 2 | 3 |
| Feels dizzy | 0 | 1 | 2 | 3 |
| Has a feeling that the room is spinning | 0 | 1 | 2 | 3 |
| Feels faint | 0 | 1 | 2 | 3 |
| Has blurred vision | 0 | 1 | 2 | 3 |
| Has double vision | 0 | 1 | 2 | 3 |
| Experiences nausea | 0 | 1 | 2 | 3 |
| Has a sore neck | 0 | 1 | 2 | 3 |
| Gets tired a lot | 0 | 1 | 2 | 3 |
| Gets tired easily | 0 | 1 | 2 | 3 |
| Has trouble sustaining attention | 0 | 1 | 2 | 3 |
| Is easily distracted | 0 | 1 | 2 | 3 |
| Has difficulty concentrating | 0 | 1 | 2 | 3 |
| Has problems remembering what they are told | 0 | 1 | 2 | 3 |
| Has difficulty following directions | 0 | 1 | 2 | 3 |
| Tends to daydream | 0 | 1 | 2 | 3 |
| Gets confused | 0 | 1 | 2 | 3 |
| Is forgetful | 0 | 1 | 2 | 3 |
| Has difficulty completing tasks | 0 | 1 | 2 | 3 |
| Has poor problem solving skills | 0 | 1 | 2 | 3 |
| Has problems learning | 0 | 1 | 2 | 3 |
| Total number of symptoms: | | | | of 21 |
| Symptom severity score: | | | | of 63 |
| Do the symptoms get worse with physical activity? | | | Y | N |
| Do the symptoms get worse with mental activity? | | | Y | N |

**Overall rating for parent/teacher/coach/carer to answer**

On a scale of 0 to 100% (where 100% is normal), how would you rate the child now?