

Brain Health Symptom Inventory

Name:	Email:
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Current Date:	Date of last injury:
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Rating - Place an "X" the appropriate box for each of the 22 rows

0 None: Rarely if ever present. Not a concern.

1-2 Mild: Occasionally present, but does really not disrupt activities. A little concern for me.

3-4 Moderate: Often present, disrupts activities, but still function. Can't do complicated tasks or activities. I am concerned.

5-6 Severe: Frequently to almost always present and disrupts activities. Cannot function without help. I'm very concerned.

		None		Mild		Moderate		Severe	
		0	1	2	3	4	5	6	
1	Headaches								
2	Feeling dizzy, loss of balance, coordination problems								
3	Vision problems, blurring, trouble seeing								
4	Sensitivity to light								
5	Hearing difficulty, sensitivity to noise								
6	Ringing in the ears								
7	Change in taste and/or smell								
8	Not able to think clearly, feeling mentally "foggy"								
9	Problems with confusion, easily confused								
10	Feeling depressed or sad								
11	Emotional withdrawal								
12	Feeling anxious or tense, nervousness								
13	Irritability, easily annoyed, temper outbursts, hostility								
14	Feeling easily overwhelmed by things								
15	Feeling more emotional								
16	Fatigue, loss of energy, getting tired easily, drowsiness								
17	Difficulty concentrating, can't pay attention, easily distracted								
18	Difficulty remembering things, forgetfulness, memory concerns								
19	Difficulty making decisions								
20	Difficulty reading								
21	Insomnia; difficulty falling or staying asleep								
22	Libido issues/concerns with desire or functioning								

Count the Number of Times Answered in This Column:	0	0	0	0	0	0	0
Multiply by the Number in This Column:	x 0	x 1	x 2	x 3	x 4	x 5	x 6
Total Score in This Column:	0	0	0	0	0	0	0

TOTAL SCORE - ADDING ALL COLUMN TOTALS ABOVE: **0**

Complete this form by checking a box for all 22 questions and follow the directions to reach a TOTAL SCORE

This form is informational only. It is not intended to diagnose or treat any condition or disease. If you have any concerns about your scores or your recovery following a concussion, TBI, or head injury, please contact your healthcare provider.

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