

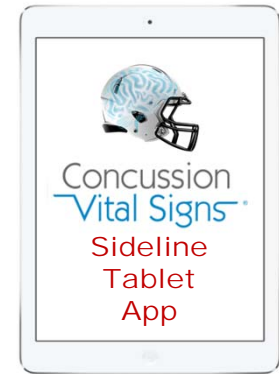


# Sideline Assessment

1

## Baseline & Education

Pre-Participation  
or Pre-Season  
Exam & Activity



2

## Sideline

Immediate  
Concussion  
Assessment

Collect sideline exam information on a handheld device or a clipboard (transfer the data when convenient).

3

## Post-Injury

Evaluation &  
Management of  
Concussed Athlete

Follow-up /  
Ongoing  
Management

Return-to-Play  
Decision

Acknowledgements: Adapted from Pocket SCAT2 – Pocket Sport Concussion Assessment Tool 2 - This tool was developed by a group of international experts at the 3rd International Consensus meeting on Concussion in Sport held in Zurich, Switzerland in November 2008. British Journal of Sports Medicine, 2009, volume 43

# Concussion Vital Signs Sideline Assessment

Acknowledgements: Adapted from Pocket SCAT2 - Pocket Sport Concussion Assessment Tool 2. This tool was developed by a group of international experts at the 3rd International Consensus meeting on Concussion in Sport held in Zurich, Switzerland in November 2008. British Journal of Sports Medicine, 2009, volume 43

Athlete Reference/ID:

Test Date/Time:

Full Name:

Test Administrator Name/Position:

Concussion should be suspected in the presence of any one or more of the following: symptoms (such as headache), or physical signs (such as unsteadiness), or impaired brain function (e.g. confusion) or abnormal behavior.

1. **Symptoms:** The presence of any of the following signs and symptoms may suggest a concussion.

Check  the SYMPTOMS exhibited by the athlete.

		Yes	No			Yes	No
1	Loss of consciousness	<input type="checkbox"/>	<input type="checkbox"/>	13	Feeling slowed down	<input type="checkbox"/>	<input type="checkbox"/>
2	Seizure or convulsion	<input type="checkbox"/>	<input type="checkbox"/>	14	Feeling like "in a fog"	<input type="checkbox"/>	<input type="checkbox"/>
3	Amnesia	<input type="checkbox"/>	<input type="checkbox"/>	15	"Don't feel right"	<input type="checkbox"/>	<input type="checkbox"/>
4	Headache	<input type="checkbox"/>	<input type="checkbox"/>	16	Difficulty concentrating	<input type="checkbox"/>	<input type="checkbox"/>
5	"Pressure in head"	<input type="checkbox"/>	<input type="checkbox"/>	17	Difficulty remembering	<input type="checkbox"/>	<input type="checkbox"/>
6	Neck Pain	<input type="checkbox"/>	<input type="checkbox"/>	18	Fatigue or low energy	<input type="checkbox"/>	<input type="checkbox"/>
7	Nausea or vomiting	<input type="checkbox"/>	<input type="checkbox"/>	19	Confusion	<input type="checkbox"/>	<input type="checkbox"/>
8	Dizziness	<input type="checkbox"/>	<input type="checkbox"/>	20	Drowsiness	<input type="checkbox"/>	<input type="checkbox"/>
9	Blurred vision	<input type="checkbox"/>	<input type="checkbox"/>	21	More emotional	<input type="checkbox"/>	<input type="checkbox"/>
10	Balance problems	<input type="checkbox"/>	<input type="checkbox"/>	22	Irritability	<input type="checkbox"/>	<input type="checkbox"/>
11	Sensitivity to light	<input type="checkbox"/>	<input type="checkbox"/>	23	Sadness	<input type="checkbox"/>	<input type="checkbox"/>
12	Sensitivity to noise	<input type="checkbox"/>	<input type="checkbox"/>	24	Nervous or anxious	<input type="checkbox"/>	<input type="checkbox"/>

2. **Memory function:** Failure to answer all questions correctly may suggest a concussion.

	Incorrect	Correct	Additional comments:
At what venue are we at today?	<input type="checkbox"/>	<input type="checkbox"/>	
Which half is it now?	<input type="checkbox"/>	<input type="checkbox"/>	
Who scored last in this game? Incorrect	<input type="checkbox"/>	<input type="checkbox"/>	
What team did you play last week/game?	<input type="checkbox"/>	<input type="checkbox"/>	
Did your team win the last game?	<input type="checkbox"/>	<input type="checkbox"/>	

3. **Balance testing:** Instructions for tandem stance *"Now stand heel-to-toe with your non-dominant foot in back. Your weight should be evenly distributed across both feet. 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."*

Athlete was observed for 20 seconds. If they make more than 5 errors (such as lift their hands off their hips; open their eyes; lift their forefoot or heel; step, stumble, or fall; or remain out of the start position for more that 5 seconds) then this may suggest a concussion.



Number of Errors:

**Any athlete with a suspected concussion should be IMMEDIATELY REMOVED FROM PLAY, urgently assessed medically, should not be left alone and should not drive a motor vehicle.**

*Sideline or abbreviated testing is designed to assist with the immediate assessment or screening of sports related concussion (e.g. SIDELINE) and is not meant to replace computerized or comprehensive neuropsychological testing. The Concussion Sideline Assessment should not be used as a stand alone tool for concussion management. The Concussion Sideline Assessment is designed to be a support for recognizing sports related concussions and to document clinical endpoints that may assist a qualified health professional in their return-to-play decision making.*