

# CMT Student Concussion Symptom Monitoring Tool

## Middle & High School Version

Meet with student weekly while he/she is symptomatic. Using the severity scale, have the student rate each symptom he/she is currently experiencing that were not present prior to the concussion.

<b>Severity of Problem</b> 0=No problem 1=Mild 2=Moderate 3=Severe
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Student Name:	Before the Injury	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6
		Date	Date	Date	Date	Date	Date
<b>Rate Symptom Severity</b>		Time	Time	Time	Time	Time	Time
Headache							
Nausea							
Balance problems							
Dizziness (spinning or movement sensation)							
Lightheadedness							
Fatigue, drowsiness, tired							
Blurry or double vision							
Sensitivity to light							
Sensitivity to noise							
Feeling slowed down, groggy, sluggish, or having no energy							
Feeling like "in a fog" or foggy							
Difficulty concentrating							
Difficulty remembering							
Sad or depressed							
Nervous or anxious							
Feeling more emotional							
Irritable							
Trouble falling asleep (at home)							
Sleeping more (at home)							
Sleeping less (at home)							
<b>Total # of Symptoms</b>							

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CONCUSSION MANAGEMENT TEAM  
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