

Athlete's Name _____ Sport _____

Date _____ Date of Injury _____ ATC's Name _____

Graded Symptom Check list (GSC)

The following signs and symptoms are to be scored by the severity of the sign or symptom on the **scale of 0-6**, where **0=not present, 1=mild, 3=moderate, and 6=most severe**.

Signs & Symptom	Time of Injury	2-3	24	48	72	4	5	6	7	8	Post	Post	Post	Post
	(repeat every 5 min. if needed)	Hours post injury	Hours post injury	Hours post injury	Hours post injury	days post	days post	days post	days post	days post	Step 1	Step 2	Step 3	Step 4
Date														
Loss of consciousness	/ / / /													
Headache	/ / / /													
"Pressure in your head"	/ / / /													
Pupil size / reaction	/ / / /													
Pupil tracking (follow finger)	/ / / /													
Blurred or double vision	/ / / /													
Tongue control / Speech (follow finger)	/ / / /													
Unusual taste or smell	/ / / /													
Poor coordination (finger to nose)	/ / / /													
Loss of orientation (time & place/Maddocks ¹)	/ / / /													
Memory (retrograde ²)	/ / / /													
Memory (anterograde) (3 words ³)	/ / / /													
Concentration (months backwards ⁴)	/ / / /													
Nausea / Vomiting	/ / / /													
Ringing in ears	/ / / /													
Dizziness/Balance problems (BESS)	/ / / /													
Vacant stare/glassy eyed	/ / / /													
Seeing stars														
Bite down / smile / shoulder shrug														
Drowsiness														
Easily distracted														
Fatigue														
Feel "in a fog"														
Feel "slowed down"														
Inappropriate emotions														
Irritability														
Nervousness														
Personality change														
Hearing (snap fingers each ear)														
Sensitivity to light														
Sensitivity to noise														
Sleep disturbance (Hours of sleep)														

- At what venue are we at today? Which half is it now? Who scored last in this match? What team did you play last week/game? Did your team win the last game?
- Who is the President? What school do you go to? What is your name? What is your coach's name? What position do you play?
- | | | |
|-------|--------|--------|
| Set 1 | Set 2 | Set 3 |
| Girl | Bubble | Paper |
| Green | Saddle | Sugar |
| Dog | Apple | Candle |
- Dec --- Nov --- Oct --- Sep --- Aug --- Jul --- Jun --- May --- Apr --- Mar --- Feb --- Jan

Post Step 1= Bike 20 minutes 10-14mph; Post Step 2= Jog a mile w/ 15 sec recovery after each lap and 10x 40 yards sprints half speed; Post Step 3= 10-14 x 40 yard sprints w/ 10-12 sec rest after each; Post Step 4= Return to practice Non-Contact