

Screening for Brain Injury

- Uses parent-report to identify children who have likely experienced a brain injury
- Takes 2-5 minutes depending on child's history, online data entry and printable results (with resources!)
- Improves:
 - Access to community and educational resources and services
 - Parent knowledge on ABI
 - Long-term outcomes

We are looking to start structured screenings and are in need of pilot sites!

Contact

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In your child's life, have they ever been **HIT** in their head, been **HIT** on their head, or have any scars on their head as a result of an injury? For example, a fall, car/ATV/snowmobile crash, a fight, sports, or being hit to the head or face? *

- Yes
 No

In your child's life, have they ever been knocked out or been dazed or confused after a **HIT** to their head? *

- Yes
 No

Has your child ever been **VERY** sick or badly hurt? For example, a brain tumor, stroke, seizures, or near drowning, car crash, bike wreck, a big fall, stopped breathing for a while, or poisoning? *

- Yes
 No