

A Checklist for Brain Injury Problems & Symptoms

This checklist is a tool to help people with brain injuries prepare for a visit with their doctor - or others - to help them better understand the problems that can occur after an injury. It can be helpful for the person with the brain injury and a trusted family member/friend to complete their own copy, then compare answers.

Instructions: The checklist is organized by several categories including cognitive, physical, psychological, and independent living skills. For each category, place a check mark beside all of the applicable difficulties you experience and indicate how often the problem occurs. You may also wish to include additional notes in the last column. Note: the checklist does not include every problem that can result from a brain injury – there are a few blank lines at the end of each section to fill in based on your own experience.

Check how often you experience any of the following:

Cognitive and Communication Difficulties	Several times a day	Daily or several times a week	Once a week or less	Never or very rarely a problem	When is it most likely to occur? Example? Does anything improve or worsen the problem?
Memory problems					
Difficulty concentrating					
Doesn't know what day it is					
Hard to stick with a task until it's completed					
Trouble focusing with background noise activity					

Cognitive and Communication Difficulties	Several times a day	Daily or several times a week	Once a week or less	Never or very rarely a problem	When is it most likely to occur? Example? Does anything improve or worsen the problem?
Misplacing or difficulty tracking things					
Difficulty making decisions					
Difficulty solving problems					
Difficulty understanding spoken instructions					
Difficulty understanding written instructions					
Difficulty finding the right words					
Trouble pronouncing words					
Unintentionally repeating the same remarks					
Difficulties doing simple math					
Mental rigidity (hard time thinking in a flexible way)					
Deficits in processing information					
Difficulty sequencing what needs to be done (doing it in the right order)					
Difficulty planning ahead					
Difficulty starting or initiating things					
Difficulty handling work requirements					

Cognitive and Communication Difficulties	Several times a day	Daily or several times a week	Once a week or less	Never or very rarely a problem	When is it most likely to occur? Example? Does anything improve or worsen the problem?
Difficulty handling school requirements					
Having to check and re-check what you do					
Disoriented by slight changes in daily routine					
Unsure about things that you know well					
Difficulty learning new things					
Impaired attention to details					
Impaired ability to learn from experience					
Inappropriate responses to people & things					
Other:					

Psychological Difficulties	Several times a day	Daily or several times a week	Once a week or less	Never or very rarely a problem	When is it most likely to occur? Example? Does anything improve or worsen the problem?
Easily agitated or irritated					
Feelings of depression					
Persistent anxiety					
Withdrawal or social isolation					

Psychological Difficulties	Several times a day	Daily or several times a week	Once a week or less	Never or very rarely a problem	When is it most likely to occur? Example? Does anything improve or worsen the problem?
Laughing or crying without apparent cause					
Insensitive to others' feelings or what's happening around you					
Mood swings					
Shouting or throwing things					
Temper outbursts that you could not control					
Other:					

Physical Difficulties	Several times a day	Daily or several times a week	Once a week or less	Never or very rarely a problem	When is it most likely to occur? Example? Does anything improve or worsen the problem?
Headaches or head pains					
Seizures					
Loss of balance					
Awkwardness or clumsiness					
Easily fatigued and/ or sleeping a lot more than usual					
Numbness or tingling in parts of your body					
One-sided weakness					

Physical Difficulties	Several times a day	Daily or several times a week	Once a week or less	Never or very rarely a problem	When is it most likely to occur? Example? Does anything improve or worsen the problem?
Restlessness, unable to sit still					
Decreased tolerance for alcohol and drugs					
Increased use of alcohol and/or drugs					
Appetite disturbances					
Trouble falling asleep					
Awakening during the night					
Slowed reaction time					
Difficulty or loss of smell & taste					
Sensitivity to temperature shifts					
Double vision					
Diminished night vision					
Sensitivity to light					
Other vision changes (specify)					
Difficulty relaxing					
Sensitivity to sound or noise					
Increased sexual activity					
Decreased sexual activity					
Other:					

Independent Living Skills Difficulties	Several times a day	Daily or several times a week	Once a week or less	Never or very rarely a problem	When is it most likely to occur? Example? Does anything improve or worsen the problem?
Trouble with writing checks					
Difficulty budgeting money					
Difficulty counting money/making change					
Difficulty planning & preparing a meal					
Problems planning a shopping list					
Difficulty taking care of children					
Other:					
Other Areas of Difficulty:	Several times a day	Daily or several times a week	Once a week or less	Never or very rarely a problem	When is it most likely to occur? Example? Does anything improve or worsen the problem?

Content last reviewed: September 2021

This project is supported by state contract #16-002A administered by the Virginia Department for Aging and Rehabilitative Services (DARS)

This article was adapted from: The Brain Injury Checklist, Brain Injury Resource Center & Adults Living with Brain Injury, Rocchio, C., Fleming, P., Mountz, E. (2005), Lash and Associates. It is provided for informational and educational purposes only. The information is not intended as a substitute for professional advice, diagnosis or treatment, and you should not use the information in place of the advice of your medical, psychological, or legal providers.