Concussion Evaluation Table of Contents

<u>Task</u>	<u>Page</u>					
<u>Desktop</u>						
Site Info Configuration	<u>2</u>					
Accessing concussion evaluations	<u>3</u>					
Changing Evaluations in Concussion Screen	<u>4</u>					
Concussion Main Tab	<u>5</u>					
Concussion Main (Red Flags/Total)	<u>6</u>					
Maddocks and Glasgow Coma	<u>7</u>					
Symptoms	<u>8</u>					
Orientation/Recall	<u>9</u>					
Concentration and Neurological	<u>10</u>					
Balance	<u>11</u>					
Delayed Recall and Coordination	<u>12</u>					
Exertion and eFiles	<u>13</u>					
VOMS	<u>14</u>					
Notes and NCAA/HS	<u>15</u>					
Staff Portal						
Accessing Concussion evaluation	<u>16</u>					
Header Details, starting concussion eval	<u>17</u>					
Tabs/pages available	<u>18</u>					
Score page	<u>19</u>					
Staff Phone						
Starting a concussion evaluation	<u>20</u>					
Completing tabs	<u>21</u>					

ATS— Concussion Evaluations

You now have the ability to set a total of 6 unique concussion evaluations. Custom 1 through 6 are available for you to set as you would like/need. <u>Before you start assigning the evaluation</u> components, you must modify your Concussion Type list, in the ADMIN—> <u>Maintenance—>Dropdown/Popup List/Update Dropdown Popup List.</u> From the menu, you need to look for concusstypes.



To determine which components will be active in your concussion evaluations you will need to access the Concussion Evaluation Parts of the Site Info. Select ADMIN—>Site Info—>Modules.

Site Info - Joe Tech		
rimary Modules Security Tab Order Opt(1) Opt(2) Opt(3) Swipe Card	Billing Claims/EDI Pre-Login Kiosk Custom Inventory	
Module Functions Specific Modules Dashboard Settings Toolbar Opt	Concussion Evaluation Parts	🕀 🚺
Specific Modules Dashboard Settings Toolbar Opt	Custom 1 / Custom 2 Custom 3 / Custom 4 Custo	
- 🗹 Athlete Portal		Sin 37 Claton 0
Athlete Portal - Announcements	Eval Type 1: Eval Type	2.
✓ Athlete Portal - Athlete Info	Baseline V Quick Eval	\sim
Athlete Portal - eFiles	Concussion Evaluation Part	
🗹 Athlete Portal - Email Staff	Symptoms	
Athlete Portal - Emergency Contacts	Glasgow Custom 1 / Custom 2 Cust	om 3 / Custom 4 Custom 5 / Custom 6
Athlete Portal - Form Access	Neurological Eval Type 3:	Eval Type 4:
Athlete Portal - Immunizations	Post Game	✓ 7 Days ✓
Athlete Portal - Injury	Recall(Delayed)	Concussion Evaluation Parts
Athlete Portal - Insurance	Coordination Glasgow	Custom 1 / Custom 2 Custom 3 / Custom 4 Custom 5 / Custom
Athlete Portal - Modalities	Maddocks Neurological	Custom 17 Custom 2 Custom 37 Custom 4 Custom 57 Custom
Athlete Portal - Protocol Lookup	Exertion Recall	Eval Type 5: Eval Type 6.
Athlete Portal - Rehabs	Balance Coordination	Daily Symptom Check V Game Time
Athlete Portal - Request Appointment	eFiles Maddocks	Symptoms
Athlete Portal - Schedule	Notes	Glasgow Glasgow
Athlete Portal - Strength	Staff Forms Balance	Neurological Neurological
✓ Auhlete Portal - Surgeries	Neck Exam	Recall Recall Recall(Delayed) Recall(Delayed)
	Background Staff Forms	Coordination
- Version	Sensor/Device Veck Exam	Maddocks Maddocks
Evaluations - Additional Findings		
Evaluations - Evaluations		Balance Balance
Evaluations - Girth		✓ Notes
	VOMS	Staff Forms Staff Forms
Apply Unchecked Modules C Standard ATS Lite Modules		Neck Exam
Select All Unselect All Expand All Collapse All	All None All None	
Select All Onselect All Expand All Collapse All		Sensor/Device Sensor/Device
Show the Staff Contact icon on the ATS Smartphone	P	
Save	Close	All None All None

Set the fields you want to have available for each of the exams. Check off the specific evaluation piece(s), you need for each of the exams.

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Adding a Concussion Evaluation:





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TOP

If you chose the wrong exam from the list you no longer have to exit the screen to refresh the choices. For example, I had chosen baseline by mistake, the screen loaded with those predetermined part of that exam. But I needed to switch it to a quick evaluation. By changing in the dropdown, they system asks if you want to refresh the evaluation content.

🥙 Concussion Information	oncussion Information
Main Maddocks/Glasgow Symptoms Orient/Recall Conce	Maddocks/Glasgow Symptoms Orient/Recall Concen/Neuro Balance Coordination VOMS eFiles Notes/SOAP/Staff NCAA/HS
General	eneral Red Flags & Observable Signs Cervical Spine Background Additional
Athlete: Davis, Crash ~	hlete: Davis, Crash Red Rags Observable Signs Neck pain or tenderness Witnessed Observed on video
Injury:	ury.
+Def Concuss * Do not use for baselines	+Def Concuss * Do not use for baselines Weakness or tingling/burning Balance / Gait difficulties / motor
Assessed: / / : : 🐳 🗸 Now	sessed: / / : : · · Now in arms or legs incoordination; stumbling, slow / laboured
Type: Baseline 🗸	rpe: Quick Eval V ATS Concussion Type V ientation or confusion, or an inability
	Admin 1: Joe Streckfus v
4	Admin 2: Do you want to refresh the evaluation content? or vacant look
s	Sport:
	# of Prev Concussions: Yes No I injury after head trauma
	Drientation (5) Symptoms (22) Glasgow (15) Decision
	mmediate Recall (15) Symptome Severity (132)* Balance Exam (30) If the athlete is known to you
	Concentration (5) Coordination (1) prior to their injury, are they different from their usual self?
	Delayed Recall (5) Std. BESS (60)* Exertion (4)* Concussion diagnosed?
	If re-testing, has the
^	
	Prev Next 📰 💿 📸 Search New Save Remove Print Close
	Main Symptoms Orient/Recall Concen/Neuro Balance Coordination Notes/SOAP/Staff NCAA/HS Exertion General Red Rags & Observable Signs Cervical Spine Additional
Actions Prev Next III O III Search New Si	ave Ren Athlete: Davis, Crash Y Red Rags Observable Signs
	Injury:
	+Der Concuss * Do not use for baselines Weakness or tingling/burning Balance (Bail difficulties (moder
	in aniso in egys incoordination; stumbling, slow / laboured
	Seizure or convulsion Disorientation or confusion, or an inability
	Admin 1: Joe Strecktus Admin 2: Deteriorating conscious state Blank or vacant look
	Vomiting
	Sport: Joe Tech Men Baseball
	Orientation (5) Symptoms (22) Glasgow (15) Decision Neuro Exam V
	Immediate Recall (15) Symptoms Severity (132)* Balance Exam (30) If the athlete is known to you prior to their injury, are they
	Concentration (5) Coordination (1) different from their usual self?
	Exercision (4) Exercision (4) If re-testing, has the
	Actions Actions Actions
	Prev Next 📰 🗿 👸 Search New Save Remove Print Close

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TOP

The tabs/modules that are available will depend on the configuration and the type of concussion evaluation that was chosen.

🤔 Concussion Information	
Main Maddocks/Glasgow Symptoms Orient/Recall Conce	en/Neuro Balance Coordination VOMS eFiles Notes/SOAP/Staff NCAA/HS
General Athlete: Davis, Crash	Red Flags & Observable Signs Cervical Spine Background Additional Red Flags Observable Signs
Injury: +Def Concuss Do not use for baselines Assessed: //:: Now Type: Baseline Admin 1: Joe Streckfus Admin 2: # of Prev Concussions: # of Prev Concussions:	Neck pain or tenderness Witnessed Observed on video Double vision Lying motionless on the playing surface Weakness or tingling/burning Balance / Gait difficulties / motor in arms or legs movements Severe or increasing headache Disorientation; stumbling, slow / laboured Loss of consciousness Deteriorating conscious state Deteriorating vestless, agitated or combative Facial injury after head trauma
Orientation (5) Symptoms (22) Immediate Recall (15) Symptoms Severi Concentration (5) Delayed Recall (5) Delayed Recall (5) Std. BESS (60)* SAC Total (30) Maddocks (5)*	Glasgow (15) Decision ty (132)* Balance Exam (30) Coordination (1) If the athlete is known to you prior to their injury, are they different from their usual self? Exertion (4)* Concussion diagnosed? VOMS If re-testing, has the athlete improved?
Prev Next 📰 💿 📷	Search New Save Remove Print Close

The concussion eval will then open, starting with the Main tab. Here you can document the type of eval (initial, baseline, # days post) who is doing the eval, and date. Doing a concussion eval does not automatically give the athlete a concussion injury. You must do this by selecting concussion from the injury drop down or selecting the +Def Concuss button to give the athlete the <u>default concussion</u> injury.

Orientation (5)	Symptoms (22) Glasgow (15)
Immediate Recall (15)	Symptoms Severity (132)* Balance Exam (30)
Concentration (5)	Coordination (1)
Delayed Recall (5)	Std. BESS (60)* Exertion (4)*
SAC Total (30)	Maddocks (5)* VOMS

The main tab is also where the overall scores are located. These will automatically fill in as you complete the different sections.

The Main tab is also where you begin to document important information: Red Flags & Observable Signs, Cervical Spine Assessment, and some background information.

Red Flags & Observable Signs Cervical Spine Background Additional					
Red Flags	Observable Signs				
 Neck pain or tenderness Double vision Weakness or tingling/burning in arms or legs Severe or increasing headache Seizure or convulsion Loss of co Deteriorat Vomiting Increasing If there is NO neck 	Witnessed Observed on video Lying motionless on the playing surface Balance / Gait difficulties / motor incoordination; stumbling, slow / laboured movements Discrimentations r confusion or an inability s Cervical Spine Background Additional ment tthat their neck is pain free at rest? pain at rest, a full range of ACTIVE pain free movement?				
	ed Flags & Observable Signs Cervical Spine Background Additional What is your dominant hand? Vhen was the most recent? # of concussions in the past: Length of recovery time for most recent: Hospitalized for a head injury? Diagnosed / treated for headache disorder or migraines? Diagnosed with a learning disability / dyslexia? Diagnosed with ADD / ADHD? Diagnosed with depression, anxiety or other psychiatric disorder? On any medications? If yes, please list				



Maddocks/Glasgow:

Man Maddocks/Glasgow Syrptoms Orient/Recall Concen/Neuro Balance	Delay Coordination Exertion VOMS eFiles Notes/SOAP/Staff NCAA/HS
Maddocks	Glasgow Coma Score
Pass What venue are we at today?	Eye Opening v
Pass 🗍 Which half is it now?	Verbal Response Score
Pass Who scored last in this match?	Motor Response
Pass 🗌 What team did you play last week/game?	Eye Opening v
Pass Did your team win the last game?	Verbal Response Score
Score (5)	Motor Response
	Eye Opening V
	Verbal Response Score
	Motor Response
If no assessment was done we recommend noting this here	If no assessment was done we recommend noting this here
Actions Prev Next	New Save Remove Print Close

The Maddocks/Glasgow area contains both the Maddocks questions and a place to document their Glasgow Coma score. You can enter up to three Glasgow assessments and each section has an area for you to document any other necessary information.

/

The Glasgow area is filled out by selected an answer from the available drop downs.

Glasgow Coma Sc	pre	
Eye Opening		
Verbal Response	No eye opening	Score
Motor Response	Eye opening in response to pain Eye opening to speech Spontaneously	
Eye Opening	Spontaneously	
Verbal Response	×	Score
Motor Response	~	
Eye Opening		
Verbal Response	×	Score
Motor Response	~ ·	

Symptoms:

	Headache		Severity:		Don't Fe	ol Diabt	1	Severity:					
	Pressure in Hea	d	Severity:			Concentra		Severity:					
	Neck Pain	iu -	Severity:			Remembe		Severity:					
	Nausea or Vomi	tina	Severity:			or Low Ene		Severity:					
	Dizziness		Severity:		Confusio			Severity:					
	Blurred Vision		Severity:		Drowsine	ess		Severity:					
	Balance Problem	ns	Severity:		Trouble	Falling Asle		Severity:					
	Sensitivity to Lig	ht	Severity:		More Em	notional		Severity:					
	Sensitivity to No	ise	Severity:		Irritability	/		Severity:					
	Feeling Slowed I	Down	Severity:		Sadness	;		Severity:					
	Feeling Like in a	Fog	Severity:		Nervous	or Anxious	;	Severity:					
s	d: I4 ◀1 Of ymptoms are worse w ymptoms are worse w all Rating:		al activity	0 9	d by				n <mark>Seve</mark> i ay not sh	rity (13	rately until th		ılc
	\$							IS SOV		e neca	c" button clie	DKeu	^

	Headache	Severity:	
	Pressure in Head	Severity:	
	Neck Pain	Severity:	
V	Nausea or Vomiting	Severity:	0 - None
V	Dizziness	Severity:	<mark>0 - None</mark> 🔤 🔲
	Blurred Vision	Severity:	0 - None
V	Balance Problems	Severity:	1 - Mild 2 - Mild
	Sensitivity to Light	Severity:	3 - Moderate
	Sensitivity to Noise	Severity:	4 - Moderate
	Feeling Slowed Down	Severity:	5 - Severe 6 - Severe
	Feeling Like in a Fog	Severity:	

This area tracks both the symptoms reported as well as their severity on a 1-6 scale.

You can also track what makes the symptoms worse, who is doing the rating as well as see the overall score. Be sure to click the ReCalc button after all symptoms have been recorded to ensure an accurate Symptom Score and Symptom Severity score. You can also add additional notes as needed in the space provided at the bottom.

Record: I Image: Signature of the second seco	Rate Performed by Self Self & Parent Clinician Self & Clinician	Symptom Score (22) 3 Symptom Severity (132) 0 Scores may not show accurately until the record is saved or the "ReCalc" button clicked
		*

Orientation/Recall:

🀡 Concussion Information	
Main Maddocks/Glasgow Symptoms Orient/Recall Concen/Neuro Balance	Delay Coordination Exertion VOMS eFiles Notes/SOAP/Staff NCAA/HS
Orientation	Immediate Recall Notes
Pass What month is it?	Use 10 word set
Pass D What is the date today?	Word Set #1 Round 1 Round 2 Round 3
Pass What is the day of the week?	Candle Pass Pass Pass
Pass What year is it?	Paper Pass Pass Pass
	Sugar Pass Pass Pass
Pass What time is it right now?	Sandwich Pass Pass Pass
Score (5)	Wagon Pass Pass Pass (15)
^	Score (5)
	New/Next Set
	Word Set #2 Round 1 Round 2 Round 3
	Pass Pass Pass
v .	Pass Pass Pass (15)
If no assessment was done we recommend noting this here	Score (5)
Actions	
Prev Next C Search	New Save Remove Print Close

Orientation questions are entered/can be edited in the admin area. A list of "concussion words" is maintained in the admin area. Five are chose automatically for the immediate recall. You can change/get a new set of words using the New/Next Set button. If you prefer a 10 word set simply check off the Use 10 word set box found at the top of the page.

Imme	diate Recall mmediate	Recall Notes			
	Use TU word set				
	Word Set #1	Round 1	Round 2	Round 3	
	Candle	Pass	Pass	Pass	
	Paper	Pass	Pass	Pass	
	Sugar	Pass	Pass	Pass	
	Sandwich	Pass	Pass	Pass	
	Wagon	Pass	Pass	Pass	Total (15)
	Score (5)			
		N	New/Next Se	et	
	Word Set #2	Round 1	Round 2	Round 3	
		Pass	Pass	Pass	
		Pass	Pass	Pass	
		Pass	Pass	Pass	
		Pass	Pass	Pass	
			Pass	Pass	Total
		Pass	Fdss		(15)

Word Set #1	Round 1	Round 2	Round 3	
Finger	Pass	Pass	Pass	
Penny	Pass	Pass	Pass	
Blanket	Pass	Pass	Pass	
Lemon	Pass	Pass	Pass	
Insect	Pass	Pass	Pass	Total (15)
Score (5)				
		New/Next Se	:t	
Word Set #2	Round 1	Round 2	Round 3	
	Pass	Pass	Pass	
Candle			1 033	
Candle Paper	Pass	Pass	Pass	
			_	
Paper	Pass	Pass	Pass	
Paper Sugar	Pass	Pass	Pass	Total (15)

🥙 Concussion Information	
Main Maddocks/Glasgow Symptoms Orient/Recall Concen/Neuro Balance D	Delay Coordination Exertion VOMS eFiles Notes/SOAP/Staff NCAA/HS
Concentration Sequence 1 Sequence 2 Pass 3-8-14 3-2-7-9 Pass 6-2-9-7-1 1-5-2-8-6 Pass 7-1-8-4-6-2 5-3-9-1-4-8 Pass Reverse Order Pass Total Score Tell me the months of the year in reverse order. Start with the last month and go backwardDecemberNovember A If no assessment was done we recommend noting this here A	Heurological Screening Can the patient read aloud (e.g. symptom check-list) and follow instructions without difficulty? Does the patient have a full range of pain-free PASSIVE cerical spine movement? Without moving their head or neck, can the patient look side-to-side and up-and-down without double vision? Can the patient perform the finger nose coordination test normally? Can the patient perform tandem gait normally?
	ew Save Remove Print Close

eurological Screening	
Can the patient read aloud (e.g. symptom check-list) and follow instructions without difficulty?	
Does the patient have a full range of pain-free PASSIVE cerical spine movement?	No Yes
Without moving their head or neck, can the patient look side-to-side and up-and-down without double vision?	~
Can the patient perform the finger nose coordination test normally?	~
Can the patient perform tandem gait normally?	~

The Concentration sequences are generated automatically, you can get a new set by selecting the New/Next Set button. These are also maintained in the admin area. The neurological screening can be completed by selected the appropriate yes/no response for each question.

A space for additional notes is available for both sections

Balance:

🌕 Concussion Information		- • ×
Main Maddocks/Glasgow Symptoms Orient/Recall Conc	cen/Neurr Balance Delay Coordination Exertion VOMS eFiles Notes/SOAP/S	itaff NCAA/HS
BESS Double BESS Single BESS Tandem Option	onal	
You should try to maintain stability in that pos	gether with your hands on your hips and with your eyes closed. osition for 20 seconds. I will be counting the number of times you when you are set and have closed your eyes.	H Errors Firm: Foam:
Which foot was tested?		Total Firm:
Tandem Gait Errors: Footwear: Tandem Gait Speed:	BESS Total Score (Firm + Foam)*: Tot	
		< >
If no assess	sment was done we recommend noting this here	
Actions		
Prev Next	Search New Save Remove Print	Close

Balance text may be entered in the admin area. ATS allows for 3 separate BESS tests as well as some optional testing at the end.

BESS Double BESS Single BESS Tandem Optional	
The first stance is standing with your feet together with your hands on your hips and with your eyes closed. You should try to maintain stability in that position for 20 seconds. I will be counting the number of times you move out of this position. I will start timing when you are set and have closed your eyes.	
BESS Double BESS Single BESS Tandem Optional	
If you were to kick a ball, which foot would you use? [This will be the dominant foot] Now stand on your non- dominant foot. the dominant leg should be held in approximately 30 degrees of hip flexion and 45 degrees of knee flexion. Again, 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.	
BESS Double BESS Single BESS Tandem Pptional	
Now stand heel-to-toe with your non-dominant foot in back. Your weight should be evenly distributed across both feet. Again, 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.	
BESS Double BESS Single BESS Tanden Optional	
Extend your arms in front of you; do a knee-bend] Pass
Put your legs together; walk a straight line by putting your heal in front of your toe and repeating] Pass
Balance a button on your nose] Pass

Delayed Recall:

1	Conc	ussion Information				_		_					• X
Ma		Maddocks/Glasgow		Orient/Recall	Concen/Neuro	Balarce	Delay	Coordination	Exertion VO	MS eFiles	Notes/SOAP/	Staff NCAA/H	IS
	Delay	yed Recall											
		Word	Time Star	ted:		Word					•		
		Candle		Pass				Pass					
		Paper		Pass				Pass					
		Sugar		Pass	ore (5)			Pass	Score	(5)			
		Sandwich		Pass				Pass					
		Wagon		Pass				Pass					
											^		
		If no assessment w	as done w	e recommend	noting this here	Ð					Ŷ		
- Ac	tion												
	Prev			Ô	Search	n	New	Sav	re F	lemove	Print	Close	

The delayed recall will automatically load the words used in the immediate recall area. It will reload 5 or 10 words depending on what was chosen during the initial testing.

Coordination:

10 C	oncussion Information					-		`					
Mai	n Maddocks/Glasgow	Symptoms	Orient/Recall	Concen/Neuro	Balance	Delay	Coordination	Exertion	VOMS	eFiles	Notes/SOAP/Staff	NCAA/HS	
C	oordination					C		J					
	Sit comfortably on the utstreched straight. N successive finger to no ouch the tip of your no	When I given se repetiti	e you a start : ons using you	signal, perform ir index finger t	five o	Pas	S						
	Which arm was te	sted?:	~										
						1	•						
		ent was dor	ne we recomm	nend noting this	here		<i>,</i>						
	ions Prev Next 🔳	i	T	Search		New	Sav	re	Remo	ve	Print	Close	

The coordination text may be entered in the admin area. Under ADMIN—>Maintenance—> Concussion Prompts.

ATS— Concussion Evaluations

Exertion:

😤 Con	cussion Information											
Main	Maddocks/Glasgow	Symptoms	Orient/Recall	Concen/Neuro	Balance	Delay	Coordination	Exertion	VOMS 6	eFiles	Notes/SOAP/Staff	NCAA/HS
				Exertion	n Tests							Score (4)
Bike	10 minutes											Pass
Run	3 10 yd sprints											🗌 Pass
Do 1	0 pushups											Pass
Jump	rope 25 times											Pass
												^
			lf no as	sessment was	done we r	recomm	end noting th	is here				~
Action			<i>~</i>	Search		New	Sa		Remov		Diat	Close
Pre	v Next	≞ •	Ô	Search		New	Sa	re	riemov	e	Print	Liose

You can enter up to four sets of exertion text under the admin area. ADMIN—> Maintenance—> Concussion Prompts.



You can upload any relevant efiles for this concussion using the efiles tab. ADMIN—>Maintenance—> Concussion Prompts.

ATS— Concussion Evaluations

<u>VOMS</u>

*	Concuss	ion Information						_		e X
Ma	in Ma	ddocks/Glasgow	Symptoms	Orient/Recall	Concen/Neuro	Balance Delay	y Coordination	Exertion VOMS	eFiles Notes/SOAP/Staff NCAA/H	IS
	Baseline	Smooth & Sacca	des Conve	rgence & VOR	Visual Motion &	Additional Notes		<u> </u>		
				Н	eadache	Dizziness	Nausea	Fogginess	Total	
	Baseli	ne:			(0-10)	(0-10)	(0-10)	(0-10)	0	
		Comments	c							<u>`</u>
l										
A	tions									
C	Prev	Next		i	Search	n New	ı Sa	ve Remo	ve Print Close	

The ATS concussion eval also includes the VOMS testing. You can document your findings as well as make any additional notes that may be needed. If you would like to learn more about the VOMS testing please see the following videos about VOMS testing

Vestibular-Ocular Motor Screening Exam

What is the VOMS

		al Motion & Additional Notes					
	Heada	ache Dizziness	Nausea Foggin	ess To	tal		
Smooth Pursuits:	Not Tested	(0-10) (0-10)	(0-10)	(0-10) 0			
ß					^		
Commer	nts:						
	Baseline Smooth & Saccades	Convergence & VOR Visu	ual Motion & Additional Notes				
		Head	lache Dizziness	Nausea Fogginess	Tota	al	
Saccades - Horizon		Not Tested	(0-10) (0-10)	(0-10) (0-10)	0		
[] Comme	(Near Point)	Measure 1:	Measure 2:	Measure 3: (Near P	Point in CM)		
Saccades - Vertical	Comments		ccades Convergence & V	Visual Motion & Additional Notes Headache Dizziness	Nausea Foggine:	ss	Total
Comme	Comments	in	Not Tested	(0-10) (0-10)	(0-10) (0	0-10)	0
	Comments VOR - Vertical	IS: Sensitivity		(0-10) (0-10)	(0-10) (0	0-10)	0
	Comments	IS: Sensitivity	nments:	(0-10) (0-10) as done we recommend noting t		9-10)	
	Comments VOR - Vertical	I ^{S:} Sensitivity Con	nments:			9-10)	

Notes/SOAP/Staff Forms:

Ö	Con	cussion Inform	ation									C		
Ν	ain	Maddocks/Gla	sgow	Symptoms	Orient/Recall	Concen/Neuro	Balance	Delay	Coordination	Exertion	VOMS	eFiles	Notes/SOAP/Staff	NCAA/HS
Г	Note	s/SOAP Notes	Staff I	Forms Com	ments/Concussi	on Note								
	No	te Date 🔍 👻	Note	Туре	Notes									Notes
														Remove
														Details
														Print List
														Print Note
	Re	cord: 🚺 🖣		0 Of 0										
	ctior	15												
	Pre				õ	Search		New	Sa	ve	Remo	ve	Print	Close
Ľ														

You can add a new update note, SOAP note, or a new Staff form from this section of the Concussion eval.

NCAA/HS.

ain Maddocks/Glasgow Sy	mptoms Orient/F	Recall Concen/Neuro Balance	Delay Coordinatio	n Exertion VOMS eFiles	Notes/SOAI/Staff	NCAA/HS
No Symptoms Apply		All Unknown			<u> </u>	
Post-Traumatic Amnesia	~	More Emotional	~	Visual Problems (blurry)	~	
Retrograde Amnesia	~	Irritability	~	Sensativity to Light	~	
Difficulty Concentrating	~	Loss of Consciousness	~	Sensativity to Noise	~	
Disorientation	~	Nausea	~	Trouble Falling Asleep	~	
Dizziness	~	Tinnitus (ringing in the ears)	~	Drowsiness	~	
Headache	~	Balance Problems	~	Vomiting	~	
Fatigue	~	Sleep More	~	Sleep Less	~	
Sadness	~	Nervous	~	Numbness	~	
Slowed	~	Fog	~	Remember	~	
Dazed	~	Confused	~	Clumsy	~	
Answers Slow	~	Neck Pain	~	Pressure in Head	~	
Moves Slow	~	Feels Slow	~	Not Thinking Clear	~	
Time to Resoultion of Symptoms:		~ S	Submitted:	NCAA ID:		Delete Submission
ctions						

If you are participating in the NCAA/HS research you will have an additional tab that requires completion. This tab is separate from the first symptoms tab and needs to filled out separately from the first symptoms page.

TOP

The Staff Portal

To start a concussion evaluation on the portal use one of three methods, using the Concussion lcon, Concussion menu, or going to the specific athlete.



You can enter an evaluation from the injury screen of the athlete's profile as well as entering an evaluation from the main athlete page. If you go from the injury page, you create the injury first. Going from the athlete screen, you can use the default concussion, or create an injury later to tie the evaluation to.

	^{ete} In	jury - 10/	5/2021 - [Davis, Cras	h - Concus	sion - N/A -	Head								
Ocilician	nno Inj	ury Desc/Ho	w Co	ontacts	Billing	Modality	Meds	Re	hab	Limit	Serv	vice No	otes/Staff Form	ns E	Evaluations
Concuss	ion* Re	eferral e	Files	FM Evals	Note	s COVI	D-19	Email	NC/	AA/HS					
Name:	Davis,	Crash			~		:	Status:			Current				~
Team:	Joe Teo	ch Men Base	eball		~		,	Athletic 1	Frainer:		Joe Stre	eckfus			~
Athl	ete - Dav Teams	ris, Crash Addr.	Other	Commu	nic <u>ations</u>	Addit. In	fo Aca	ad. Eligik	oility	Med H	list.*	Injury*	Modality*	Meds	ż
			1	Commu s/Staff/Msg				ad. Eligik sure*	bility Eme		list.* Files*	Injury*		L T	* Comments*
Athlete	Teams	Addr. Service*	1											L T	
Athlete	Teams	Addr. Service*	1											L T	

TOP

	Co	ncussion	1			
Team	Joe Tech Me	en Baseball	~			
Athlete	Ruth, Baby		~			New or Existing (
New or Existing C	oncussion? Existing					Existing Concuss
	New or Existing C New		~			
	Injury			✓ Add default cor	Add default concussion injury	Add default concussion injury
	Date Assessed Admin By	1/20/2022 02:04 PM	Now	Type Admin By2		

You will need to fill-in all the fields in shown in yellow below in order to be able to save the concussion. You can still drop down and add this to an existing injury, or add a default concussion injury, if this assists your record keeping. You do not need an injury, for example this could be a baseline evaluation, noted as such under type. NOTE: You WILL NOT be able to proceed until you save the header information completed in this area!

Injury	Add default concussion injury	Red Flags Observable Signs	Cervical Spine Addition	al General Notes
Date Assessed 4/20/2021 01:08 PM Now	Туре	Concussion Sensor		
Joe Streckfus	Admin By2	Sensor/Device Activated	~	
Red Flags Observable Signs Cervica Spine Addi	tional General Notes	Concussion Indicated	~	
leck pain or tenderness		Save		
Double vision		Save		
 Weakness or tingling/furning in arms or legs 		Red Flags Observable Signs	Cervical Spine Additio	nal General Notes
 Severe or increasing headache 		General Notes		
Seizure or convulsion				
Loss of consiousness				
 Determating conscious state 				
Voniting				
Increasingly restless, agitated or combative				
Save New				
Red Flags Observable Signs Cervical Spine Ad	dditional General Notes	–		
Uitnessed	Red Flags Observable Signs Cervical Spine	A dit Save New		
Lying motionless on the playing surface	Does the athlete report that their neck is pain free at rest?	Save		
Balance / Gait difficulties / motor incoordination;	If there is NO neck pain at rest,			
stumbling, slow / laboured movements	does the athlete have a full range of ACTIVE pain free movement?	~		
Disorientation or confusion, or an inability to respond appropriately to questions	Is the limb strength and sensation normal?	~		
Blank or vacant look	Notes			
Facial injury after head trauma				
Save New	Save New			

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After saving the header required information, the section area becomes available to take you through the other portions of the evaluation.

Enter the appropriate information for each tab as needed. Navigate either with the next or previous or the drop down window.

evaluati	on. 🥆								
		C	oncussio	n	6				
			Pr	rev Gene	Sect	ion	~	Next	
	O Your	concussio	on has beer	n saved! Ple	ase continue	to next sec	tion.		
	Team	Joe Tech I	Men Baseball	*				Section	
	Athlete	Ruth, Bab						General	
	New or Existing C	oncussion?	y					General Background	
		Existing						Maddocks Glasgow Coma Score	
	Existing Concuss	04/21/202	1 Game Time	~				Symptoms	
	Injury				*	Add default	concussion	Orientation Immediate Recall	
	Date Assessed	4/21/2021	12:42 PM	Now		Туре	Gam	Concentration Neurological Screening	
	Admin By	Joe Streck	kfus	~		Admin By2		BESS Delayed Recall	
-								Coordination	
								Exertion VOMS	
								Decision Scores	
		Pre	v Sym	ptoms		~	Next		
Scroll Down	Scroll Up								
Symptom		S	cale	-	As with a	any modu	ile on t	the	
Headache			4 - Moderate	~	staff port				
Pressure in	Head		5 - Severe	~	save afte				
Nausea or	Vomiting		1 - Mild	~	-	valuation,	on ea	ach	
Dizziness			0 - None	~	page.				
Blurred Vis	ion		0 - None	· ·					
☐ Symptoms ar	e worse with physica	l activity			-				
Symptoms and	e worse with mental a	activity							
verall Rating:	Very	Different		~					
ymptom Score	(22) 22								
symptom Severi	ty (132) 19								
ate performed I ○ Self	by:	0	Self & Parent						
 Sen Clinician 			Self & Clinician						
lotes									
Save									

The scores page, is the total of all of the numbers you have entered throughout your evaluation.

		Section			
		Prev	Scores	~	Next
Orientation (5)	0				
Immediate Recall (15)	0	0			
Concentration (5)	0				
Delayed Recall (5)	0	0			
SAC Total (30)	0				
Symptoms (22)	22				
Symtoms Serverity (132)	19				
Physical (2)	0	8			
Glasgow (15)	0	0	0		
Balance Exam (30)	0				
Coordination (1)	0				
Std. BESS (60)	0				
Maddocks (5)	ο				
Exertion (4)	ο				
VOMS	ο				

If you are going to be doing a follow up exam, post-injury check ins, do make sure you start a brand new exam each time you are doing one.



Staff Phone:

Seconcussions -	From the staff phone, if you have the button defined you can
	utilize that to open the concussion module here. Or from the Menu tab, you can choose which way you want to complete your concussion evaluation.
Full Eval	
View	Concussion General
Scheduling -	Prev General V Next
Referrals -	Organization
Med Services -	Select 🗸
Add Strength	Team
Wydration Alert Log -	Athlete
COVID-19 Screening -	►
General -	
Reports	Call 1-888-328-2577 Version 1.0.0, Copyright © 2021 Keffer Development Services, LLC
Sector Logout	Search for your athlete the way you would like from the menu above.
	Section Prev General V Next
You have <u>1 unread</u> message.	Organization
🖿 🛤 🛝 💼 💼	Select V
Staff Forms + Note Buik Modality Limitations Modalities Rehabs	Team Joe Tech Men Baseball
🚨 💼 🎪 📾 🧊 🙆	Athlete Ruth, Baby
Concussion Screen/Tests	Or start typing part of the athlete's name
	Start typing part of name
	Select
If you have an injury created, you can fill it in here, o use the default injury.	r Injury
Using the save button at the bottom of the pag	ge Add default concussion injury
saves the header information allowing you to the begin the remainder of the evaluation.	Date: 4/21/2021 01:38 PM Now
	Туре
www.atsusers.com says	Admin By:
Your concussion has been saved! Please continue to next section.	Joe Streckfus ~
	Admin By2:
ок	Sensor/Device Activated

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ATS— Concussion Evaluations

		Section	n		
F	Prev	General	~	Next	
Your concussi	on ha	s been saved. Ple	ease continu	ie to next	section
Organization					
Select					~
Team Joe Tech Me	n Bas	eball			~
Athlete					
Ruth, Baby					~
Existing Conc	ussioi	1			

Iniury

Either utilize the drop down, or buttons to navigate between tabs/modules of the concussion evaluation. Each different set of concussion evals will show you the tabs that have been set in the <u>SiteInfo</u>.

Prev Orientation V	Complete the associated tabs and information required by your administrator
Your conc ussion orientation information has been saved. Pl ease	
continue to next section.	
Pass 🛛 What month is it?	
Pass 🛛 What is the date today?	
Pass 🛛 What is the day of the week?	
Pass 🛛 What year is it?	
Pass 🛛 What time is it right now?	
Score (5) 5	
Notes	
	www.atsusers.com says
	Your concussion orientation information has been saved! Please
	continue to next section.
If no assessment was done we recommend noting this here.	J
	Section
Save	Prev Scores V Next
	Orientation (5) 5
Again scores from the modules you enter numbers	

Again scores from the modules you enter numbers into will automatically be totaled and populated in the Scores page.

	Sectio	n
Prev	Scores	✓ Next
Orientation (5)	5	
Immediate Recall (15)	0	0
Concentration (5)	0	
Delayed Recall (5)	0	0
SAC Total (30)	5	