

Head Injury Questionnaire

Instructions: Listed below are a number of symptoms that may describe the way you felt before your head injury and the way you feel now. Put a check in the "Before Box" next to the symptom only if you had that particular symptom before your head injury. Put a check in the "After Box" if you have been experiencing that particular symptom after the head injury. If the symptom does not describe you before or after the head injury, do not check either box related to that particular symptom.

If you check a symptom, either Before or After, briefly describe any changes or problems you have experienced as to that symptom. If you need additional space, please attach additional sheets to your response.

Physical Health

Weakness/Paralysis Before After

Describe: _____

Impaired coordination/balance Before After

Describe: _____

Vision:

- **double vision** Before After

Describe: _____

- **blurriness** Before After

Describe: _____

- **trouble tracking/focusing** Before After

Describe: _____

- **altered visual perception** Before After

Describe: _____

Difficulty hearing/Ringing in ears Before After

Describe: _____

Difficulty Swallowing Before After

Describe: _____

Dizziness/Nausea Before After

Describe: _____

Headaches Before After

Describe: _____

Neck pain Before After

Describe: _____

Back pain Before After

Describe: _____

Sensitivity to light Before After

Describe: _____

Sensitivity to noise Before After

Describe: _____

Fatigue Before After

Describe: _____

Sleeping more Before After

Describe: _____

Trouble falling or staying asleep Before After

Describe: _____

Reduced smell Before After

Describe: _____

Seizures Before After

Describe: _____

Other physical changes and problems

Before **After**

Describe: _____

Psychological Health

Mood Swings

Before **After**

Describe: _____

Irritability

Before **After**

Describe: _____

Depression/Withdrawal

Before **After**

Describe: _____

Restlessness/Agitation

Before **After**

Describe: _____

Lack of motivation/initiation

Before **After**

Describe: _____

Loss of interest in activities

Before **After**

Describe: _____

Poor impulse control

Before **After**

Describe: _____

Anger outbursts

Before **After**

Describe: _____

More easily prone to frustration or overload

Before **After**

Describe: _____

Lability (less control of emotions)

Before **After**

Describe: _____

Denial and poor awareness of problems/changes

Before **After**

Describe: _____

Inappropriate social interaction (swearing, lack of tact, inappropriate eye contact, verbosity, etc.) Before After

Describe: _____

Hyper (more) sexuality Before After

Describe: _____

Hypo (less) sexuality Before After

Describe: _____

Other emotional/behavioral changes and problems Before After

Describe: _____

Cognitive Health

Disorientation to person, place time Before After

Describe: _____

Confusion Before After

Describe: _____

Impaired short-term memory Before After

Describe: _____

Impaired long-term memory Before After

Describe: _____

Inflexibility Before After

Describe: _____

Reduced concentration Before After

Describe: _____

Reduced attention Before After

Describe: _____

Difficulty doing more than one thing at a time Before After

Describe: _____

Reduced math skills Before After

Describe: _____

Perseveration (getting “stuck” on a certain topic, task, word) Before After

Describe: _____

Difficulty staying on task or on topic Before After

Describe: _____

Impaired judgement and problem-solving skills Before After

Describe: _____

Disorganization Before After

Describe: _____

Difficulty with abstract thinking and reasoning skills Before After

Describe: _____

Slowed thinking Before After

Describe: _____

Increased rate of performance Before After

Describe: _____

Decreased rate of performance Before After

Describe: _____

Slurred speech Before After

Describe: _____

Changes in voice quality (nasal, hoarse, breathy, etc.) Before After

Describe: _____

Language Before After

Describe: _____

- **Difficulty with word order and grammar** Before After

Describe: _____

- **Decreased auditory comprehension** Before After

Describe: _____

- **Decreased comprehension of abstract material** Before After

Describe: _____

- **Increased difficulty with reading (including slower reading and poor reading comprehension)** Before After

Describe: _____

- **Increased difficulty with writing, including spelling** Before After

Describe: _____

- **Other cognition/communication changes and problems** Before After

Describe: _____