Have you ever lost consciousness from a drug overdose or being choked?

- Yes
- No (IF NO, GO TO QUESTION 3)

How many times from a drug overdose?
- ______# overdose

How many times from being choked?
- ______# choked

Have you EVER been told by a doctor or other health professional that you had any of the following?

- epilepsy or seizures?
- a stroke or a transient ischemic attack?
- cerebral palsy?
- brain cancer?
- a brain infection like meningitis or encephalitis?
- toxic exposure, like to lead or pesticides?
- dementia, like Alzheimer’s Disease?
- a progressive disease like AIDS, multiple sclerosis, Parkinson’s Disease or Huntington’s Disease?

(If yes, which one ______)

Interpreting Findings
The validity of this tool is not based on elicitation of a perfect accounting for a person’s lifetime history of brain injury. Instead, it provides a means to estimate the likelihood that consequences have resulted from one’s lifetime exposure.

A person may be more likely to have ongoing problems if they have any of the following:

- WORST: one moderate or severe TBI
- FIRST: TBI with loss of consciousness before age 15
- OTHER SOURCES: Any TBI combined with another way their brain function has been impaired
**ABI SCREENING TOOL**
**LIFETIME HISTORY OF TRAUMATIC INJURY (from the OSU TBI-ID) AND OTHER ACQUIRED BRAIN INJURIES SCREENING TOOL**

**INSTRUCTIONS**

Brain injury is a chronic condition. It is often a multi-occurring condition with mental health, substance abuse, unemployment, corrections involvement, and homelessness. Screening for brain injury is a best practice when responding to, and/or planning clinical and community based responses for clients served in health, community and corrections services. Brain injury screening tools do NOT provide a diagnosis or indicate an absence of a brain injury. They are however valid for a brief assessment for a person’s exposure to brain injury.

**Definitions**

**Acquired brain injuries (ABI)** occur when there is an event that results in damage to the brain anytime during a person’s life after birth which temporarily or permanently impairs a person’s physical, cognitive, or behavioral functions. Brain injuries are not primarily related to a degenerative disease or aging process.

**Non-traumatic brain injuries** are injuries to the brain caused by stroke, infection, anoxia, vascular lesions, or tumor of the brain.

**Traumatic brain injuries (TBI)** may be penetrating or non-penetrating and are from external forces causing trauma to the brain to such as from a bump, blow, jolt, blast, or hit to the body. Concussions are a type of TBI.

**Administration of OSU TBI-ID+ABI Interview Form**

The Screening for Lifetime History of TBI and other Acquired Brain Injuries (OSU TBI-ID+ABI) is a standardized tool to screen for an Acquired Brain Injury.

- Administer this screening tool, either by telephone or face-to-face.
- Complete questions 1 – 3.

**Interpretation of Screening Results**

The validity of this tool is not based on elicitation of a perfect accounting of a person’s lifetime history of brain injury. Instead, this provides a means to estimate the likelihood that consequences have resulted from one’s lifetime exposure.

It is recommended that additional consideration be given to the potential effects of this exposure when:

- **WORST** – One moderate or severe TBI (question 1 b)
  - Moderate = Lost consciousness between 30 minutes to 24 hours
  - Severe = Lost consciousness for 24 hours or longer
- **FIRST** – TBI with any loss of consciousness before age 15 (question 1 c)
- **OTHER SOURCES** – Any ABI combined with another way that their brain function has been impaired (questions 2 & 3)

**Next Steps**

After completion of the OSU TBI-ID+ABI, the following steps should be considered:

- Provide a copy of the completed tool to the individual for their records.
- If warranted (i.e., the individual screens positive for worst, first, or other sources as defined in the interpretation of screening results).
  - Complete the Mayo-Portland Adaptability Inventory-4 (available at http://www.tbims.org/mpai/).
  - Refer the individual to a medical professional for additional assessment(s).
- Provide information about, or make a referral to, resource facilitation available through the Brain Injury Alliance of Iowa (BIA-IA) at info@biaia.org or by calling 855-444-6443. More information about BIA-IA can be found at www.biaia.org.
- Additional steps may be recommended by your organization for further assessments or medical record requests.


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For more information about the Iowa Brain Injury Services Program, visit http://idph.iow.gov/brain-injuries