

HEAD/NECK/SHOULDER SCREENING QUESTIONNAIRE

Have you had difficulty with speaking?

Have you noticed a recent decreased ability to concentrate?

Have you noticed a recent change in your vision or ability to see?

Have you recently experienced a blow to the head or a whiplash injury?

Have you been living in close quarters, such as in a dormitory?

Do you have a depressed immune system?

Are your eyes sensitive to light?

Have you recently had a seizure?

Do you administer medicine or drugs to yourself for which you need to inject using a needle?