



3 Question DVBIC TBI Screening Tool Instruction Sheet

Purpose and Use of the DVBIC 3 Question TBI Screen

The purpose of this screen is to identify service members who may need further evaluation for mild traumatic brain injury (MTBI).

Tool Development

The 3 Question DVBIC TBI Screening Tool, also called The Brief Traumatic Brain Injury Screen (BTBIS), was validated in a small, initial study conducted with active duty service members who served in Iraq/Afghanistan between January 2004 and January 2005.

Schwab, K. A., Baker, G., Ivins, B., Sluss-Tiller, M., Lux, W., & Warden, D. (2006). The Brief Traumatic Brain Injury Screen (BTBIS): Investigating the validity of a self-report instrument for detecting traumatic brain injury (TBI) in troops returning from deployment in Afghanistan and Iraq. *Neurology*, 66(5)(Supp. 2), A235.

Who to Screen

Screen should be used with service members who were injured during combat operations, training missions or other activities.

Screening Instructions

Question 1: A checked [] response to any item A through F verifies injury.

Question 2: A checked [] response to A-E meets criteria for a positive (+) screen. Further interview is indicated. A positive response to F or G does not indicate a positive screen, but should be further evaluated in a clinical interview.

Question 3: Endorsement of any item A-H verifies current symptoms which may be related to an MTBI if the screening and interview process determines a MTBI occurred.

Significance of Positive Screen

A service member who endorses an injury [Question 1], as well as an alteration of consciousness [Question 2 A-E], should be further evaluated via clinical interview because he/she is more highly suspect for having sustained an MTBI or concussion. The MTBI screen alone does not provide diagnosis of MTBI. A clinical interview is required.

For more information contact:

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1. Did you have any injury(ies) during your deployment from any of the following? (check all that apply):

- A. Fragment
- B. Bullet
- C. Vehicular (any type of vehicle, including airplane)
- D. Fall
- E. Blast (Improvised Explosive Device, RPG, Land mine, Grenade, etc.)
- F. Other specify: _____

2. Did any injury received while you were deployed result in any of the following? (check all that apply):

- A. Being dazed, confused or “seeing stars”
- B. Not remembering the injury
- C. Losing consciousness (knocked out) for less than a minute
- D. Losing consciousness for 1-20 minutes
- E. Losing consciousness for longer than 20 minutes

NOTE: Endorsement of A-E meets criteria for positive TBI Screen

- F. Having any symptoms of concussion afterward (such as headache, dizziness, irritability, etc.)
- G. Head Injury

NOTE: Confirm F and G through clinical interview

H. None of the above

3. Are you currently experiencing any of the following problems that you think might be related to a possible head injury or concussion? (check all that apply):

- A. Headaches
- B. Dizziness
- C. Memory problems
- D. Balance problems
- E. Ringing in the ears
- F. Irritability
- G. Sleep problems
- H. Other specify: _____

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