

# NEUROLOGIC ASSESSMENT

**TBIPTA = Occurrence of Posttraumatic Amnesia**

**PTADur = Duration of PTA**

**PTAVer = Source of verification of PTA**

<b>1. CDE Variable</b>	TBIPTA = Occurrence of Post Traumatic Amnesia PTADur = Duration of PTA PTAVer = Source of verification of PTA
<b>2. CDE Definition</b>	Occurrence and period of time with Post Traumatic Amnesia following TBI. Source of verification on information obtained.
<b>3. Recommended instrument for assessment</b>	N/A
<b>4. Description of measure</b>	Categorical or interval measurement; Recommended that source of verification, if available, be provided
<b>5. Permissible values</b>	<p><b><u>Occurrence:</u></b></p> <ul style="list-style-type: none"> <li>• No</li> <li>• Yes -&gt; complete GCS assessments</li> <li>• Suspected</li> </ul> <p><b><u>Duration:</u></b></p> <p><i><u>Basic:</u></i></p> <ul style="list-style-type: none"> <li>• None</li> <li>• &lt; 1 hour</li> <li>• 1-24 hours</li> <li>• &gt; 24 hours</li> </ul> <p><i><u>Intermediate/advanced:</u></i></p> <ul style="list-style-type: none"> <li>• None</li> <li>• &lt; 1 minute</li> <li>• 1-29 minutes</li> <li>• 30-59 minutes</li> <li>• 1-24 hours</li> <li>• 1-7 days</li> <li>• &gt; 7 days</li> <li>• No return of consciousness prior to death or discharge</li> <li>• Unknown</li> </ul> <p><b><u>Source of verification:</u></b></p> <ul style="list-style-type: none"> <li>• self report</li> <li>• witness</li> <li>• clinical interview</li> <li>• medical chart</li> <li>• not available</li> </ul>
<b>6. Classification: Basic/Intermediate/Advanced</b>	Identical
<b>7. Procedure</b>	Respondents/Patients self report or Clinician interview. If clinically monitored, structured sequential interviews are recommended. Supplementary evidence helpful in

	establishing PTA and its length.
<p><b>8. Comments/Special instructions:</b>  For individuals presenting for care after PTA and/or LOC have resolved, establishing precise interval of either or both can be challenging. If LOC or PTA unwitnessed, subjects may have difficulty distinguishing between the two. It is recommended that coding of PTA include the period of LOC. Though self-report is weaker evidence than clinical assessment during emergence from PTA, a careful clinical interview supported by other sources when available is currently viewed as preferable to self-report alone.</p>	
<p><b>9. Rationale/justification:</b>  Length of PTA is one of key measures in determining diagnosis of mTBI and its differentiation from more severe TBI. Self report is acceptable (CDC Report to Congress) but verification establishes higher level of evidence.</p>	
<p><b>10. References:</b>  CDC Report to Congress; WHO articles on mild TBI; ACRM criteria; DoD/DVA consensus definition.</p>	
<p><b>Recommended time for assessment:</b>  On admission to study, or if LOC ongoing after return of consciousness.</p>	