

## Symptom Check List

Please mark any symptoms listed below that you have observed in your child and/or yourself.

If student; grade level: \_\_\_\_\_

History of concussions? If yes, how many: \_\_\_\_\_

Referred by: \_\_\_\_\_

- Frequent Squinting
- Bothered by light
- Holding book very close to the eyes (i.e. 7-8" away)
- Avoidance of close work
- Covering/Closing one eye when reading
- Fingers used to trace lines in a book
- Frequently skips lines or loses place when reading
- Letters or lines "run together" or "jump" when reading
- Tilting or moving the head back and forth when reading
- Omitting, miscalling, or repeating words when reading aloud
- Sub-vocalization during reading; murmuring or silently moving lips
- Confuses similar words/letters
- Poor Spelling
- Poor Handwriting
- Tasks/ Homework take longer than they should
- Reads well, but has a difficult time recalling what was read
- Short attention span when reading
- A drop in scholastic or athletic performance
- Poor hand-eye coordination
- Fatigues easily with everyday tasks