

# CENC-External PCE Mapping Interview-Form v1

Subj ID or MRN:

Date:  -  -   
(DD) (MMM) (YYYY)

Visit tag: \_\_\_\_\_

Interviewer: \_\_\_\_\_

## Structured Interview for Potential Concussive Event (PCE) Mapping

### Section I: Surface Mapping for Events Needing CDI

**Preparatory statement by interviewer:** During this interview, I will be looking for all possible head injuries you may have had during your lifetime. How long this takes varies; if you get fatigued let me know and we can take a break from the interview. Some of the questions may seem repetitive, but it is important that we gather as many details as possible.

1. During your lifetime was your head or neck ever injured or possibly injured?

Yes If Yes, complete question 2.

No If No, skip to PCE Mapping Section II (question 6a) and for the next 3 events found during PCE mapping conduct full CDI.

2. I'd like you to think about the incident that was the worst in terms of possible immediate or after effects to your head; what date (month,year) did that worst incident take place (or when was the only one)?

-

Date: \_\_\_\_\_

**Conduct full Concussion Diagnostic Interview (CDI)** M M M Y Y Y Y

If multiple PCEs are equally worst and subject is unable to distinguish, then use the first one (of the equally worst PCEs) for question 2 and the second sequential one for question 4.

3. Were there any other times that you may have injured your head or neck?

Yes If Yes, complete question 4.

No If No, skip to PCE Mapping Section II (question 6a) and for the next 2 events found during PCE mapping conduct CDI for each.

4. Now think about the second worst incident in terms of possible immediate or after effects to your head; what date (month, year) did that take place (or when was the only other one)?

Date:  -   
(MMM) (YYYY)

**Conduct full CDI for this Second Worst event (from #4)**

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**Structured Interview for Potential Concussive Event (PCE)**

**Section I, continued: Surface Mapping for Events Needing CDI**

5a. Were there any other times that you may have injured your head or neck during your life?  Yes **If Yes, go to question 5b**  
 No **If No, follow the instructions below question 5c**

5b. Now I want you to think about the very first time you may have injured your head or neck during your life.  Same (first PCE was worst or 2nd worst PCE) **If same, skip to question 6a and for the next 1 event found during PCE mapping conduct full CDI.**  
 Different (first was not worst or 2nd worst PCE) **If different, go to question 5c**

Was this very first time either of the 2 incidents you already told me about or a different incident?

5c. When was the first time you may have injured your head or neck? Date:    -      
(MMM)                      YYYY

**If 5c completed: Conduct full CDI for this First event**

**Interviewer instructions:** If you conducted a CDI for question 5c (Very First event) then at least 3 lifetime PCEs have already been identified and undergone CDI. Go to PCE Mapping Section II (question 6a). During remainder of PCE mapping (sections II – IV) do not conduct any more CDI follow on interviews unless deemed necessary. Instead, for each and every additional PCE identified in sections II-IV collect screening information and enter into Other PCE Mapping Table(s) by asking the scripted questions from the cue card.

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**Structured Interview for Potential Concussive Event (PCE) Mapping**

**Mapping Section II: Other Blast Exposures During Lifetime**

**Interviewer:** Have PCE cue cards and "other" PCE mapping tables handy to collect further information on yes responses. If < 3 CDIs have been conducted then also have blank CDIs handy to conduct up to 3 CDIs (> 3 CDIs may be appropriate or desired, especially if TBI diagnosis is questionable based on cue card screening answers).

**Preparatory statement [Introductory Script]:** "You have already told me about some events during your life that you may have injured your head or neck." {if no PCEs found in Section I instead say: "You have already told me that you did not have any events during your life where you may have injured your head or neck.} Now, to make sure we cover every possibility, I am going to ask about some specific scenarios. You do not need to tell me again about events you already mentioned. So only think about other times you may have injured your head or neck."

6a. During your life, were you ever nearby when a **controlled** detonation took place (such as breaching tactics or training)?  Yes **If Yes, continue to question 6b.**  
 No **If No, skip to question 6f.**

6b. About how many times during your life were you nearby when a controlled detonation occurred?

**Interviewer:** If a range is provided, then record the mid-point of the range. Round up to nearest whole number if needed. If participant says a 100 or >, enter 99

6c. Which controlled detonation stands out or affected you most and when was it? (or when was the only one?). [If multiple controlled detonation exposures and subject is unable to decide which was worse then ask him/her to choose the first one]

Date:    -      
(MMM) YYYY

**Interviewer:** Using cue card, ask screening questions on 6c event (worst controlled detonation) and record in Other PCE Mapping Table [If needed, remind participant to answer only in relation to this worst (or first) controlled detonation exposure].

If screening responses are all "No" then mark "No" in "CDI Needed" column.

Conversely, if any screening responses are "Yes" then:

- Enter or change to "Uncontrolled" in the Controlled/Uncontrolled column
- If < 3 CDIs have been performed so far in Part-1 then mark "Yes" for "CDI Needed" column and do full CDI on this event.
- Enter next worst controlled blast into table and repeat above steps until one is entered where all screening responses are "No"

**Interviewer:** If exposed to a single controlled detonation (i.e. 6b is 01), then skip to question 6f after completing Table entry +/- CDI for event 6c, otherwise continue to 6d.

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Structured Interview for Potential Concussive Event (PCE) Mapping

Section II continued: Other Blast Exposures During Lifetime

6d. What was the approximate date (month and year) of the first one?

First controlled blast:    -      
 (MMM) (YYYY)

6e. When was the most recent?

Most recent controlled blast:    -      
 (MMM) (YYYY)

6f. Besides incidents that you already told me about, during your entire life were you ever nearby when an uncontrolled explosion or a blast occurred?

- Yes If Yes, see interviewer instructions below
- No If No, skip to question 7 (Section III)

[This may include a controlled detonation when something went wrong that was not described earlier].

**Interviewer:** If **Yes**, for each and every additional uncontrolled blast incident either i) conduct full CDI, or ii) if >=3 CDIs have already been completed then use other event cue-card to ask for additional information and record in Other PCE Mapping Table. If any stand out to participant then start with that one, otherwise assess each with CDI or Table entry in chronological order starting with the first.

**Interviewer:** In completing Other PCE Table, every uncontrolled blast not previously recorded must be entered. If < 3 CDIs have been completed so far, then for the worst one enter "Yes" for "CDI needed" and do full CDI. Repeat this step and record CDI for up to 2 additional controlled blast events if still < 3 CDIs completed.

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(DD)                      MMM                      YYYY

**Structured Interview for Potential Concussive Event (PCE) Mapping**

**Section III: Open-ended Other** Head/Neck injuries during lifetime

**Interviewer:** Have PCE cue cards and "other" PCE mapping tables handy to collect further information on yes responses. If < 3 CDIs have been conducted then also have blank CDIs handy to conduct up to 3 lifetime CDIs.

7. During your entire life, were you ever medically evaluated or treated soon after a possible injury to your head or neck? Please do not include any incidents you already described.
- Yes If Yes, see interviewer instructions below.
- No If No, go to question 8 (Section IV).

**Interviewer:** If **Yes**, for each and every additional treated/evaluated incident **conduct either** i) CDI, or ii) if >=3 CDIs have already been completed then use Other PCE cue card to ask for additional information and record in Other PCE Table.

If there are more than one evaluation/treatment events during lifetime that have not already been interviewed then assess in chronological order starting with the first.

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**Structured Interview for Potential Concussive Event (PCE) Mapping**

**Section IV: Other Close-ended** Head/Neck injuries (non blast) during lifetime

**Interviewer:** Have PCE cue cards and "other" PCE mapping tables handy to collect further information on yes responses. If < 3 CDIs have been conducted then also have blank general CDIs handy to conduct up to 3 CDIs.

8. During your life, did you ever injure your head or neck in a moving vehicle accident that you have not already described for me (i.e. not including any incidents mentioned during PCE mapping or CDI)?
- Yes    If Yes, see interviewer instructions below  
 No      If No, go to question 9.

**Interviewer:** If **Yes**, for each and every additional MVA incident either i) conduct CDI, or ii) if  $\geq 3$  CDIs have already been completed then use Other PCE cue-card to ask for additional information and record in Other PCE Table. If there are more than one MVA events during lifetime that have not already been interviewed then assess in chronological order starting with the first.

9. During your life, did you ever injure your head or neck in a fall or from being hit by something that you have not already described for me (i.e. not including any incidents mentioned during PCE mapping or CDI)?
- Yes    If Yes, see interviewer instructions below  
 No      If No, go to question 10.

**Interviewer:** If **Yes**, for each and every additional fall/hit incident either i) conduct CDI, or ii) if  $\geq 3$  CDIs have already been completed then use Other PCE cue-card to ask for additional information and record in Other PCE Table. If there are more than one fall/hit events during lifetime that have not already been interviewed then assess in chronological order starting with the first.

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**Structured Interview for Potential Concussive Event (PCE) Mapping**

**Section IV continued: Other Close-ended Head/Neck injuries (non blast) during lifetime**

10. During your life, did you ever injure your head or neck from being physically assaulted; that is in a fight, from being hit by someone, or from being shaken violently that you have not already described for me (not including any incidents mentioned during the earlier PCE mapping or CDI)?
- Yes    If Yes, see interviewer instructions below
- No      If No, go to question 11.

**Interviewer:** If Yes, for each and every additional assault incident either i) conduct CDI, or ii) if  $\geq 3$  CDIs have already been completed then use Other PCE cue-card to ask for additional information and record in Other PCE Table. If there are more than one assault events during lifetime that have not already been interviewed then assess in chronological order starting with the first.

11. Have you ever been shot in the head during your life that you have not already described for me?
- Yes    If Yes, see interviewer instructions below
- No      If No, end of PCE mapping

**Interviewer:** If Yes, for each and every additional shooting incident either i) conduct CDI, or ii) if  $\geq 3$  CDIs have already been completed then use Other PCE cue-card to ask for additional information and record in Other PCE Table. If there are more than one shooting events during lifetime that have not already been interviewed then assess in chronological order starting with the first.

==> When completed, end of PCE mapping.