



TSAAS COMBATIVES COURSE INJURY SCREENING FORM



FULL NAME: _____
(RANK) (FIRST) (M.I.) (LAST)
FULL SOCIAL: _____ AGE: _____ HT: _____ WT: _____
M/F: _____ UNIT: _____ MAC LEVEL: _____ CELL#: _____

2. WHEN WAS YOUR LAST PHYSICAL? _____ (MONTH AND YEAR)
3. CURRENT PHYSICAL CONDITION: EXCELLENT / GOOD / FAIR / BELOW STANDARD
4. ARE YOU CURRENTLY ON A PROFILE? Y / N IF YES, FOR WHAT? _____
5. DID YOU REQUIRE A WAIVER FOR VISION TO ENTER THE MILITARY? Y / N
IF SO, WHY? _____
6. HAVE YOU EVER HAD ANY TYPE OF EYE SURGERY? Y / N IF YES, WHAT TYPE AND WHEN?

7. HAVE YOU EVER BEEN KNOCKED UNCONSCIOUS? Y / N DATES _____
8. FEMALES: ARE YOU PREGNANT OR FEEL YOU MAY BE PREGNANT? Y / N
9. FEMALES: HAVE YOU UNDERGONE BREAST AUGMENTATION? Y / N
10. DO YOU HAVE , OR HAVE YOU HAD ANY INJURIES TO THE FOLLOWING AREAS?
- | | | | | | |
|--------------|-------|--------------|-------|----------------------|-------|
| a. TBI/Head | Y / N | i. Dizziness | Y / N | q. Leg | Y / N |
| b. Nose | Y / N | j. Headaches | Y / N | r. Kidney | Y / N |
| c. Jaw/teeth | Y / N | k. Wrist | Y / N | s. Memory | Y / N |
| d. Face | Y / N | l. Hand | Y / N | t. Numbness | Y / N |
| e. Neck | Y / N | m. Arm | Y / N | u. Cold Weather Inj. | Y / N |
| f. Back | Y / N | n. Knee | Y / N | v. Hot Weather Inj. | Y / N |
| g. Elbow | Y / N | o. Ankle | Y / N | w. Staph Infection | Y / N |
| h. Shoulder | Y / N | p. Foot | Y / N | x. Ring Worm | Y / N |

If you answered "Yes" to any of the questions from section #10, or you have any additional injuries, provide details on the back of this sheet. Include the 5Ws for each separate injury.

I understand that under the provisions of 5 USC 552a, The Privacy Act of 1974, that it is prohibited to release any of the information contained in this file to agencies or individuals outside the US Government without my consent. I also understand that I am under no obligation to authorize or allow such release for whatever purpose it deems appropriate or necessary; and should I withhold such authorization, the information will not be released to private third parties and no consequences of any kind will result.

SIGNATURE: _____ DATE: _____