



Concussion in Sport Group (CISG) Statement on Use of the SCAT6 and Child SCAT6 for Baseline Screening

Baseline (pre-season) screening examinations for different aspects of brain function might be meaningful with respect to concussion assessment and helping to guide a safe return to sport after a suspected concussive incident and have the potential to identify risk factors for sports injury and for improvement of specific neurological functions.

SCAT6

When such information is sought on an athlete's pre-injury state, the use of a baseline evaluation using the Sport Concussion Assessment Tool version 6 (SCAT6) may be useful to compare to a similar assessment performed after a suspected concussion. Currently baseline screening is not a requirement for use of the SCAT6, since comparison to age and gender specific normative data might be possible where available. Baseline screening is only useful when conducted by healthcare professionals (HCPs) (or their supervised designees including a trained technician). In these cases, the interpretation of SCAT6 results is the responsibility of the healthcare professional. This procedure might especially be necessary in countries and regions with limited access to HCPs.

The SCAT6 is designed for use by HCPs. Trained technicians must be proficient in standardised test administration and be versed in the ethical principles of behavioural assessment (e.g., test security, athlete confidentiality, limits of practice). It is essential that individuals using the SCAT6 should be familiar with the tool, have received training in its use and have some experience with its implementation.

Specifically, the SCAT6 should not be used by parents to screen their own children or by coaches/administrators to screen athletes. In these cases, the Concussion Recognition Tool (CRT6) should be promoted as an educational and concussion identifying aid.

More important than baseline screening is a thorough and accurate post-injury multimodal clinical assessment by an HCP. Only an HCP is permitted to use the SCAT6 to help diagnose concussion and initiate an appropriate management strategy.

Child SCAT6

The conditions specified for use of the SCAT6 apply to the use of the Child SCAT6 (for use in ages 8-12). Moreover, baseline screening with the Child SCAT6 is not recommended due to the rate of child neurodevelopment.

In order to support better quality control in administering the SCAT6 and Child SCAT6, CISG will develop a video guide that will be freely accessible to support HCPs in consistently applying each component of the SCAT6 and Child SCAT6.