

Motion/Simulator Sickness Screening Form

Motion sickness has many symptoms, but not all individuals experience the same symptoms. Common symptoms that may occur alone or in combination include: general discomfort, drowsiness, headache, sweating, nausea, blurred vision, dizziness, or faintness.

For your safety, we need to assess the risk that you might become ill in our experiment. Please consider the following questions that best characterizes your experience.

1. Do you experience motion sickness when flying in an airplane?
Never Seldom Often Always Not applicable
2. Do you experience motion sickness on boats?
Never Seldom Often Always Not applicable
3. Do you experience motion sickness trains?
Never Seldom Often Always Not applicable
4. Do you experience motion sickness when riding in the back seat of cars?
Never Seldom Often Always Not applicable
5. Do you experience motion sickness in a simulator?
Never Seldom Often Always Not applicable

Scoring Criteria:

1. If answered **Never** to all questions, accept Accept
2. If answered **Seldom** to one or more questions and exposure was significant (e.g., flew once, experienced motions sickness once), reject. If there are clear mitigating factors (e.g., turbulence was severe) participant may be accepted, but include rationale below:
Reject
Accept with explanation

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3. If answered **Often** one questions, then reject, unless clear mitigating factors are present (e.g., flies several times a year and rarely experiences symptoms, and then only in the most severe turbulence). If the symptoms are severe, such as vomiting or prolonged symptoms, then reject. Note rationale below.

Reject

Accept with explanation

4. If answered **Often** in two or more questions, reject regardless of mitigating factors.

Reject

Rationale for exception to rule (where allowed):