Form A2: Co-participant Demographics

ADRC: ___________________ PTID: ___________________ Form date: ___ / ___ / _______ Visit #: _______ Examiner's initials: _______

Language:
☐ 1 English
☐ 2 Spanish

Mode:
☐ 1 In-person
☐ 2 Remote (reason): _______
☐ 3 Telephone
☐ 4 Video
☐ 5 Not completed (reason): _______

Key (remote reason):
1 = Too cognitively impaired
2 = Too physically impaired
3 = Homebound or nursing home
4 = Refused in-person visit
5 = Other

Key (not completed reason):
94 = No co-participant
95 = Physical problem
96 = Cognitive/behavioral problem
97 = Other
98 = Verbal refusal

INSTRUCTIONS: This form is to be completed by intake interviewer based on co-participant’s report. This form should not be provided directly to the co-participant. For additional clarification and examples, see the UDS Coding Guidebook for Form A2. Check only one box per question.

Section 1 — Co-participant’s Relationship to Participant

1. What is the co-participant’s relationship to the participant?
   ☐ 1 Spouse, partner, or companion (include ex-spouse, ex-partner, fiancé(e), boyfriend, girlfriend)
   ☐ 2 Child (by blood or through marriage or adoption)
   ☐ 3 Sibling (by blood or through marriage or adoption)
   ☐ 4 Other relative (by blood or through marriage or adoption)
   ☐ 5 Friend, neighbor, or someone known through family, friends, work, or community (e.g., church)
   ☐ 6 Paid caregiver, health care provider, or clinician

2. How long has the co-participant known the participant? (If the co-participant has known the participant for less than 1 year, use 0.)
   _______ Years (999 = Unknown)

3. Does the co-participant live with the participant?
   ☐ 0 No
   ☐ 1 Yes (SKIP TO QUESTION 5)

4. What is the primary mode of contact with the participant?
   ☐ 1 In-person
   ☐ 2 Telephone
   ☐ 3 Video conferencing
   ☐ 4 Texting or email
   ☐ 5 Social media platforms
   ☐ 6 Other (SPECIFY):

4a1. What is the approximate frequency of contact?
   ☐ 1 Daily
   ☐ 2 At least three times per week
   ☐ 3 Weekly
   ☐ 4 At least three times per month
   ☐ 5 Monthly
   ☐ 6 Less than once a month

4a2. What is the average amount of time spent in contact with the participant during each encounter?
   ☐ 1 Less than 5 minutes (appropriate for texting or email and may be applicable to other modes of contact as well)
   ☐ 2 5-15 minutes
   ☐ 3 15-30 minutes
   ☐ 4 30-60 minutes
   ☐ 5 Longer than one hour

5. Is there a question about the co-participant’s reliability?
   ☐ 0 No
   ☐ 1 Yes

Section 2 — Co-participant’s Judgment of Participant’s Memory

Ask the next three questions directly to the co-participant.

6. Do you feel like the participant’s memory is becoming worse?
   ☐ 0 No
   ☐ 1 Yes, but this does not worry me
   ☐ 2 Yes, and this worries me
   ☐ 9 Unknown

7. About how often does the participant have trouble remembering things?
   ☐ 1 Never
   ☐ 2 Rarely
   ☐ 3 Sometimes
   ☐ 4 Often
   ☐ 5 Very Often
   ☐ 9 Unknown

8. Compared to 10 years ago, would you say that the participant’s memory is much worse, a little worse, the same, a little better, or much better?
   ☐ 1 Much better
   ☐ 2 A little better
   ☐ 3 The same
   ☐ 4 A little worse
   ☐ 5 Much worse
   ☐ 9 Unknown

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