

FOLLOW-UP VISIT PACKET NACC UNIFORM DATA SET (UDS)

Form C2: Neuropsychological Battery Scores

ADC name: _____ Subject ID: _____ Form date: ____/____/____

Visit #: _____ Examiner's initials: _____

INSTRUCTIONS: This form is to be completed by ADC or clinic staff. For test administration and scoring, see Instructions for Neuropsychological Battery Form C2. Any new subjects who enroll in the UDS after the implementation of UDS3 must be assessed with the new neuropsychological test battery (Form C2).

KEY: If the subject cannot complete any of the following exams, please give the reason by entering one of the following codes:

95 / 995 = Physical problem 96 / 996 = Cognitive/behavior problem 97 / 997 = Other problem 98 / 998 = Verbal refusal

| 1. Montreal Cognitive Assessment (MoCA) | |
|--|---|
| 1a. Was any part of the MoCA administered? | |
| <input type="checkbox"/> 0 No (If No, enter reason code, 95 – 98): ____ (SKIP TO QUESTION 2a) | |
| <input type="checkbox"/> 1 Yes (CONTINUE WITH QUESTION 1b) | |
| 1b. MoCA was administered: | <input type="checkbox"/> 1 In ADC or clinic <input type="checkbox"/> 2 In home <input type="checkbox"/> 3 In person — other |
| 1c. Language of MoCA administration: | <input type="checkbox"/> 1 English <input type="checkbox"/> 2 Spanish <input type="checkbox"/> 3 Other (SPECIFY): _____ |
| 1d. Subject was unable to complete one or more sections due to visual impairment: | <input type="checkbox"/> 0 No <input type="checkbox"/> 1 Yes |
| 1e. Subject was unable to complete one or more sections due to hearing impairment: | <input type="checkbox"/> 0 No <input type="checkbox"/> 1 Yes |
| 1f. TOTAL RAW SCORE — UNCORRECTED (Not corrected for education or visual/hearing impairment) | |
| <i>Enter 88 if any of the following MoCA items were not administered: 1g – 1l, 1n – 1t, 1w – 1bb</i> | ____ (0–30, 88) |
| 1g. Visuospatial/executive — Trails | ____ (0–1, 95–98) |
| 1h. Visuospatial/executive — Cube | ____ (0–1, 95–98) |
| 1i. Visuospatial/executive — Clock contour | ____ (0–1, 95–98) |
| 1j. Visuospatial/executive — Clock numbers | ____ (0–1, 95–98) |
| 1k. Visuospatial/executive — Clock hands | ____ (0–1, 95–98) |
| 1l. Language — Naming | ____ (0–3, 95–98) |
| 1m. Memory — Registration (two trials) | ____ (0–10, 95–98) |
| 1n. Attention — Digits | ____ (0–2, 95–98) |
| 1o. Attention — Letter A | ____ (0–1, 95–98) |

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| | |
|---|--------------------------------|
| 1p. Attention — Serial 7s | __ __ (0-3, 95-98) |
| 1q. Language — Repetition | __ __ (0-2, 95-98) |
| 1r. Language — Fluency | __ __ (0-1, 95-98) |
| 1s. Abstraction | __ __ (0-2, 95-98) |
| 1t. Delayed recall — No cue | __ __ (0-5, 95-98) |
| 1u. Delayed recall — Category cue | __ __ (0-5; 88=Not applicable) |
| 1v. Delayed recall — Recognition | __ __ (0-5; 88=Not applicable) |
| 1w. Orientation — Date | __ __ (0-1, 95-98) |
| 1x. Orientation — Month | __ __ (0-1, 95-98) |
| 1y. Orientation — Year | __ __ (0-1, 95-98) |
| 1z. Orientation — Day | __ __ (0-1, 95-98) |
| 1aa. Orientation — Place | __ __ (0-1, 95-98) |
| 1bb. Orientation — City | __ __ (0-1, 95-98) |
| 2. ADMINISTRATION OF THE REMAINDER OF THE BATTERY | |
| 2a. The tests following the MoCA were administered: <input type="checkbox"/> 1 In ADC or clinic <input type="checkbox"/> 2 In home <input type="checkbox"/> 3 In person — other | |
| 2b. Language of test administration: <input type="checkbox"/> 1 English <input type="checkbox"/> 2 Spanish <input type="checkbox"/> 3 Other (SPECIFY): _____ | |
| 3. Craft Story 21 Recall (Immediate) | |
| 3a. Total story units recalled, verbatim scoring (If test not completed, enter reason code, 95-98, and SKIP TO QUESTION 4a.) | __ __ (0-44, 95-98) |
| 3b. Total story units recalled, paraphrase scoring | __ __ (0-25) |
| 4. Benson Complex Figure Copy | |
| 4a. Total score for copy of Benson figure (If test not completed, enter reason code, 95-98) | __ __ (0-17, 95-98) |
| 5. Number Span Test: Forward | |
| 5a. Number of correct trials (If test not completed, enter reason code, 95-98, and SKIP TO QUESTION 6a.) | __ __ (0-14, 95-98) |
| 5b. Longest span forward | __ __ (0, 3-9) |

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| 6. Number Span Test: Backward | |
|--|--|
| 6a. Number of correct trials <i>(If test not completed, enter reason code, 95–98, and SKIP TO QUESTION 7a.)</i> | __ __ (0–14, 95–98) |
| 6b. Longest span backward | __ __ (0, 2–8) |
| 7. Category Fluency | |
| 7a. Animals: Total number of animals named in 60 seconds <i>(If test not completed, enter reason code, 95–98)</i> | __ __ (0–77, 95–98) |
| 7b. Vegetables: Total number of vegetables named in 60 seconds <i>(If test not completed, enter reason code, 95–98)</i> | __ __ (0–77, 95–98) |
| 8. Trail Making Test | |
| 8a. PART A: Total number of seconds to complete (if not finished by 150 seconds, enter 150) <i>(If test not completed, enter reason code, 995–998, and SKIP TO QUESTION 8b.)</i> | __ __ __ (0–150, 995–998) |
| 8a1. Number of commission errors | __ __ (0–40) |
| 8a2. Number of correct lines | __ __ (0–24) |
| 8b. PART B: Total number of seconds to complete (if not finished by 300 seconds, enter 300) <i>(If test not completed, enter reason code, 995–998, and SKIP TO QUESTION 9a.)</i> | __ __ __ (0–300, 995–998) |
| 8b1. Number of commission errors | __ __ (0–40) |
| 8b2. Number of correct lines | __ __ (0–24) |
| 9. Craft Story 21 Recall (Delayed) | |
| 9a. Total story units recalled, verbatim scoring <i>(If test not completed, enter reason code, 95–98, and SKIP TO QUESTION 10a.)</i> | __ __ (0–44, 95–98) |
| 9b. Total story units recalled, paraphrase scoring | __ __ (0–25) |
| 9c. Delay time (minutes) <i>(99=Unknown)</i> | __ __ (0 – 85 minutes) |
| 9d. Cue (“boy”) needed | <input type="checkbox"/> 0 No <input type="checkbox"/> 1 Yes |
| 10. Benson Complex Figure Recall | |
| 10a. Total score for drawing of Benson figure following 10- to 15-minute delay <i>(If test not completed, enter reason code, 95–98, and SKIP TO QUESTION 11a.)</i> | __ __ (0–17, 95–98) |
| 10b. Recognized original stimulus from among four options? | <input type="checkbox"/> 0 No <input type="checkbox"/> 1 Yes |

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11. Multilingual Naming Test (MINT)

11a. Total score
(If test not completed, enter reason code, 95–98, and **SKIP TO QUESTION 12a**) _____ (0–32, 95–98)

11b. Total correct without semantic cue _____ (0–32)

11c. Semantic cues: Number given _____ (0–32)

11d. Semantic cues: Number correct with cue (88 = Not applicable) _____ (0–32, 88)

11e. Phonemic cues: Number given _____ (0–32)

11f. Phonemic cues: Number correct with cue (88 = Not applicable) _____ (0–32, 88)

12. Verbal Fluency: Phonemic Test

12a. Number of correct **F-words** generated in 1 minute
(If test not completed, enter reason code, 95–98, and **SKIP TO QUESTION 12d.**) _____ (0–40, 95–98)

12b. Number of **F-words** repeated in 1 minute _____ (0–15)

12c. Number of **non-F-words** and rule violation errors in 1 minute _____ (0–15)

12d. Number of correct **L-words** generated in 1 minute
(If test not completed, enter reason code, 95–98, and **SKIP TO QUESTION 13a.**) _____ (0–40, 95–98)

12e. Number of **L-words** repeated in one minute _____ (0–15)

12f. Number of **non-L-words** and rule violation errors in 1 minute _____ (0–15)

12g. TOTAL number of correct **F-words and L-words** _____ (0–80)

12h. TOTAL number of **F-word and L-word** repetition errors _____ (0–30)

12i. TOTAL number of **non-F/L words** and rule violation errors _____ (0–30)

13. Overall appraisal

- 13a. Per the clinician (e.g., neuropsychologist, behavioral neurologist, or other suitably qualified clinician), based on the UDS neuropsychological examination, the subject's cognitive status is deemed:
- 1 Better than normal for age
 2 Normal for age
 3 One or two test scores are abnormal
 4 Three or more scores are abnormal or lower than expected
 0 Clinician unable to render opinion