Form A2: Co-participant Demographics

ADRC: _____ PTID: _____ Form date: __ __ / __ __ / __ __ __ __ Visit #: _____ Examiner's initials: _____

Language:	Mode:	Key (remote reason):	Key (not completed reason):
☐ 1 English ☐ 2 Spanish	☐ 1 In-person ☐ 2 Remote *(reason):* __ ☐ 1 Telephone ☐ 2 Video ☐ 0 Not completed *(reason):* __ __	*1=Too cognitively impaired* *2=Too physically impaired* *3=Homebound/nursing home* *4=Refused in-person visit* *5=Other*	*92=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 all types 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?

(Please include an average of all encounter types)

- ☐ 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