

Neuropsychiatry Unit Cognitive Examination

Name:

Date of birth:

Sex: M / F

Date of assessment:

Instructions:

Introduce yourself by name, state the purpose and likely duration of the examination. If the patient already known your name, inform him/her the name of your colleague and remind him / her to remember.

“Please try to remember my name as I will ask you for it later.”

A. ATTENTION

Notes

Score

A-1 Orientation to time and place

Test orientation by asking the following questions:

- (a) "What time is it now?" (within 2 hours of current time)
- (b) "What day of the week is it today?"
- (c) "What month is it?"
- (d) "Where are you now?" (name of hospital or clinic)
- (e) "What suburb or city are we in?"

- ☐ Time
- ☐ Day
- ☐ Month
- ☐ Name of hospital
or clinic
- ☐ City

SCORING: 1 point for each correct answer. Maximum score is 5.

__/5

A-2 Digit span forward and reverse

"I am going to say some groups of numbers to you, and I want you to say them back to me."

Begin with 2 digits. Each digit to be spoken one second apart, and each sequence given only once. Subject scores according to the longest string of digits repeated correctly.

For reverse span, say:

“Now I’m going to give you some more numbers, and I want you to say them back to me backwards.”

Use the same list of numbers, starting with 2 digits.

SCORING : 0 1 2 3 4 points

Forward : ≤ 3 4 5 6 7 digits

Reverse : ≤ 2 3 4 5 ≥ 6 digits

Forward:

- ☐ 6-2
- ☐ 3-9-4
- ☐ 4-1-9-3
- ☐ 6-2-4-0-1
- ☐ 9-1-3-5-8-2
- ☐ 3-9-0-1-1-4-8

__/4

Reverse:

- ☐ 6-2
- ☐ 3-9-4
- ☐ 4-1-9-3
- ☐ 6-2-4-0-1
- ☐ 9-1-3-5-8-2
- ☐ 3-9-0-1-1-4-8

____/4

Maximum score is 4 for Forward and 4 for Reverse.

A-3 Days of the week in reverse "Please say the days of the week in reverse to me starting with the last day of the week." SCORING: 1 point for each correct answer. Maximum score is 7. Subjects can start from either Sunday or Saturday as last day of week.	<input type="checkbox"/> Saturday <input type="checkbox"/> Friday <input type="checkbox"/> Thursday <input type="checkbox"/> Wednesday <input type="checkbox"/> Tuesday <input type="checkbox"/> Monday <input type="checkbox"/> Sunday __/7
ATTENTION TOTAL	__/20

B. VISUOCONSTRUCTIONAL	Notes	Score
B-1 Drawing reproduction Put the Subject Completion Sheet in front of the subject, point to B-1 and say: "Please copy each of these four drawings in the space beneath." After they have attempted their copy, say: "Now look at the four drawings, and I'm going to ask you to remember what they were later on." SCORING: 1 point for a full correct reproduction, ½ point for two or less errors in construction (e.g., overall shape, angles, number of sides), and no points for more than two errors. Maximum score is 4. (Include scoring for reproduction from memory.)	<input type="checkbox"/> quad <input type="checkbox"/> cross <input type="checkbox"/> cube <input type="checkbox"/> intersecting	__/4
B-2 Praxis Ask subject to demonstrate each of the following actions: "Show me how you blow out a match." "Show me how you use a toothbrush." "Show me how you wave goodbye. Please use your other hand." "Show me how you would use a hammer to hammer in a nail." SCORING: 1 point for each correct action. Demonstrate action if needed, ½ mark if subject can then imitate the action. Maximum score is 4.	<input type="checkbox"/> blow <input type="checkbox"/> teeth <input type="checkbox"/> wave <input type="checkbox"/> hammer	__/4
B-3 Left /right orientation Ask the subject to perform the four following commands: "Show me your right hand." "Touch your right ear with your left hand."	<input type="checkbox"/> right hand <input type="checkbox"/> right ear/left hand	

<p>“Point to my right shoulder.” (Examiner crosses arms.) “With your right hand point to my left hand.”</p> <p>SCORING: 1 point for each correct action. Maximum score is 4.</p>	<p><input type="checkbox"/> right shoulder <input type="checkbox"/> right hand/left hand</p> <p style="text-align: right;">__ /4</p>
<p>B-4 Neglect</p> <p>Ensure that the subject has intact sensations in both arms.</p> <p>(a) “Close your eyes.” Touch the patient on the left forearm, then the right forearm, each time asking them: “Which side am I touching?”</p> <p>SCORING: ½ point for each correct answer. Maximum score is 1.</p> <p>(b) Then touch both forearms at the same time, and ask: “Which side did I touch?”</p> <p>SCORING: 1 point if they reply “Both”, ½ a point if they only identify one side and no points if no side is identified. Maximum score is 1.</p> <p>(c) Put the Subject Completion Sheet in front of the subject. Ask them: “This is a clock face. Can you please put in the numbers?”</p> <p>Point to the circle in B-4 and say: “Please draw the hands showing a quarter to four o’clock.”</p> <p>SCORING: 1 point for the correct numbers on the clock; 1 point for the correct hand placement. Maximum score is 2.</p>	<p><input type="checkbox"/> left <input type="checkbox"/> right</p> <p style="text-align: right;">__ /1</p> <p><input type="checkbox"/> both</p> <p style="text-align: right;">__ /1</p> <p><input type="checkbox"/> numbers on clock</p> <p><input type="checkbox"/> quarter to four o’clock</p> <p style="text-align: right;">__ /2</p>
<p>B-5 Calculation</p> <p>Ask subject to correctly answer each of the following questions: “What is fourteen plus seven?” “What do you get when you multiply nine by four?” “If a jacket priced at sixty dollars was selling at ten percent off, how much would you pay?” “You have two shelves of books, together holding eighteen books. The bottom shelf holds twice as much as the top shelf. How many books are on each shelf?”</p> <p>SCORING: 1 point for each correct answer. Maximum score is 4.</p>	<p><input type="checkbox"/> 14+7=21 <input type="checkbox"/> 9x4=36 <input type="checkbox"/> \$60 less 10%=\$54 <input type="checkbox"/> 6 on top, 12 on bottom</p> <p style="text-align: right;">__ /4</p>
<p style="text-align: right;">VISUOCONSTRUCTIONAL TOTAL</p>	<p style="text-align: right;">__ /20</p>

C. MEMORY	Notes	Score
<p>C-1 Verbal recall</p> <p>“Please repeat the following three items: eagle, guitar, blue.” (spoken at one-second intervals)</p> <p>SCORING: 1 point for each item repeated correctly. Maximum score is 3.</p> <p>“I will ask you again these 3 items after a few minutes.”</p> <p>To allow for adequate time to test retention, progress to testing Items C-2 and C-3 prior to testing recall as outlined below.</p>	<p>Repeat :</p> <ul style="list-style-type: none"> <input type="checkbox"/> eagle <input type="checkbox"/> guitar <input type="checkbox"/> blue 	<p>___/3</p>
<p>C-2 Spatial recall</p> <p>Overleaf from where the subject initially reproduced the drawings in section B-1 of the Subject Completion Sheet, ensure the original reproductions are not visible, say:</p> <p>“Please reproduce the four drawings I asked you to copy before.”</p> <p>SCORING: 2 points for a full reproduction for each shape; 1 point if there are two or less errors in construction (overall shape, angles, number of sides), and no points if more than two errors are present or if subject’s reproduction does not resemble the original. Maximum score is 8.</p>	<ul style="list-style-type: none"> <input type="checkbox"/> quad <input type="checkbox"/> cross <input type="checkbox"/> cube <input type="checkbox"/> intersecting 	<p>___/8</p>
<p>C-3 Remote memory</p> <p>Ask the following questions:</p> <p>(a) “What is your date of birth?”</p> <p>(b) “What is your home address?”</p> <p>(c) “Who is our country’s head of state?”</p> <p>(d) “Please tell me something that has been in the news recently?” (e.g., political, war, disaster, sport, celebrity)</p> <p>(e) “Can you tell me my name?” (Or the name that I have mentioned to you?)</p> <p>SCORING: 1 point for each correctly answered question; 1 additional point for (d) if extra level of detail provided. Maximum score is 6.</p> <p>Ensure you test verbal recall (C-1) prior to moving to item D-1. Now sum the scores for the three memory items to produce a total score out of 20.</p>	<ul style="list-style-type: none"> <input type="checkbox"/> date of birth <input type="checkbox"/> address <input type="checkbox"/> head of state <input type="checkbox"/> news item <input type="checkbox"/> news detail <input type="checkbox"/> examiner’s name 	<p>___/6</p>
<p>C-4 Verbal recall</p> <p>When item C-3 has been completed, ask the subject:</p> <p>“Can you please repeat the items I mentioned before?”</p>	<p>Recall:</p> <ul style="list-style-type: none"> <input type="checkbox"/> eagle <input type="checkbox"/> guitar <input type="checkbox"/> blue 	

SCORING: 1 point for each recalled item. Prompt the subject for each item not recalled. “One of them was a bird/musical instrument/colour.”	
SCORING: ½ a point for correct answers given after prompting score. No points given if, after prompting, the item is not recalled. Maximum score is 3.	___ /3
MEMORY TOTAL	___ /20

D. EXECUTIVE	Notes	Score											
<div>D-1 Sequencing</div> <div>With each hand, ask subject to mimic the 3-step sequence of movements you make with your hand, saying: “Please copy these hand actions.” (hand in a fist; hand edge down with fingers extended; hand flat)</div> <div>Demonstrate with each hand first, and ask the patient to demonstrate once with each hand prior to beginning the trial. “Now repeat this 5 times with your left/right hand.” (on each hand)</div> <div>SCORING:</div> <table><tr><td>Number of error</td><td>None</td><td>1 – 2</td><td>3 – 5</td></tr><tr><td>L hand score</td><td>2</td><td>1</td><td>0</td></tr><tr><td>R hand score</td><td>2</td><td>1</td><td>0</td></tr></table> <div>Maximum score is 4</div>	Number of error	None	1 – 2	3 – 5	L hand score	2	1	0	R hand score	2	1	0	<div><input type="checkbox"/> copy actions</div> <div><input type="checkbox"/> 5 times, left hand</div> <div><input type="checkbox"/> 5 times, right hand</div> <div>___/4</div>
Number of error	None	1 – 2	3 – 5										
L hand score	2	1	0										
R hand score	2	1	0										
<div>D-2 Categorical fluency</div> <div>“Please name as many animals as you can in one minute.”</div> <div></div> <div>SCORING: Divide the total number of animals correctly named by two, allowing for half points for odd numbers. Maximum score is 10.</div>	<div>Total animals: ___</div> <div>___ / 10</div>												

D-3 Abstraction Read out a pair of objects to the subject, and say: “These two objects are alike in some way. How are they similar?”			<input type="checkbox"/> Pineapple and orange <input type="checkbox"/> Desk and chair <input type="checkbox"/> Painting and poem <input type="checkbox"/> Oil and coal <div style="text-align: right;">__ /4</div>
Pineapple and orange	Fruit Food, grow in ground, edible Give difference not similarity	1 ½ 0	
Desk and chair	Items of furniture Wooden, have legs Give difference not similarity	1 ½ 0	
Painting and poem	Works of art Made, show things, someone does them Give difference not similarity	1 ½ 0	
Oil and coal	Forms of energy From the ground, pay for them Give difference not similarity	1 ½ 0	
SCORING: Score according to the above table. Maximum score is 4.			
D-4 Interference Ask the subject to place either hand on a flat surface (e.g., table), saying: “Please tap once when I tap twice, and tap twice when I tap once.” Test the patient on each contingency prior to beginning the trial. Tap in this sequence: once-once-twice-once-twice-twice-once-twice-once-twice <div> Number of errors 0 1 – 2 ≥ 3 Scoring 2 1 0 Maximum score is 2 </div>			<input type="checkbox"/> 1 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <div style="text-align: right;">__ /2</div>
<div style="text-align: right;">EXECUTIVE TOTAL:</div>			<div style="text-align: right;">__ /20</div>

E. LANGUAGE	Notes	Score
<p>E-1 Comprehension</p> <p>Give the following instructions: “Take this pen in your left hand, point it at the window/floor, then place it on the desk.” (Subject undertakes task in correct order without leaving out any stage.)</p> <p>SCORING: 1 point for each step completed correctly. Maximum score is 3.</p> <p>Ask the question: “The lion is killed by the tiger. Which one survives?” (Correct answer is tiger.)</p> <p>SCORING: 1 point for the correct answer.</p>	<p><input type="checkbox"/> picks up in left hand</p> <p><input type="checkbox"/> points to window/floor</p> <p><input type="checkbox"/> places on desk</p> <p><input type="checkbox"/> tiger</p>	<p>___/4</p>
<p>E-2 Repetition</p> <p>“Please repeat these word or words after me”:</p> <p>(a) Banana (b) Artillery (c) Constitutional (d) The ambulance arrived and picked up the patient. (e) Where, when, what and who.”</p> <p>SCORING: 1 point for each correct word and correctly repeated sentence. Maximum score is 5.</p>	<p><input type="checkbox"/> Banana</p> <p><input type="checkbox"/> Artillery</p> <p><input type="checkbox"/> Constitutional</p> <p><input type="checkbox"/> The ambulance...</p> <p><input type="checkbox"/> Where, when, what...</p>	<p>___/5</p>
<p>E-3 Naming</p> <p>Ask the subject to correctly name each item as below: “What is this called?” (Examiner points to own shirt/blouse.) “What colour is this?” (Examiner points to own pants/skirt – item of one colour only.) “What is this called?” (Examiner points to sole of shoe.) “What is this called?” (Examiner points to collar of shirt, or buckle on belt.) “What part of the body is this?” (Examiner points to knuckle on clenched fist.)</p> <p>SCORING: 1 point for each correct answer. Maximum score is 5.</p>	<p><input type="checkbox"/> shirt</p> <p><input type="checkbox"/> colour</p> <p><input type="checkbox"/> sole of shoes</p> <p><input type="checkbox"/> collar/buckle</p> <p><input type="checkbox"/> knuckle</p>	<p>___/5</p>
<p>E-4 Writing</p> <p>Put the Subject Completion Sheet in front of the subject, point to E-4 and say: “Write a sentence of your choice here. It must contain a noun, a verb, and make sense.”</p> <p>SCORING: 1 point if the sentence makes sense, words are spelt correctly and are in the correct order, and grammatically accurate; ½ mark if the sentence is incomplete but makes sense (i.e. a phrase), or has up to two errors in spelling, order of words or grammar; 0 points if the sentence is not complete, does not make</p>	<p><input type="checkbox"/> First sentence</p>	

<p>sense, and contains more than two errors in spelling, grammar, or order. Maximum score is 1.</p> <p>Then say:</p> <p>“I would like you to write the following sentence: The boy’s aunt made a large pie out of steak and dough.”</p> <p>The sentence may be repeated in full another two times.</p> <p>SCORING: 1 point if all words are included, spelt correctly, and in the order given; ½ point if up to two words are substituted, missed, misspelled, or placed out of order; no marks if the sentence is not complete, or there are more than two errors in spelling, placement or order. Maximum score is 1.</p>	<p><input type="checkbox"/> second sentence</p> <p>___/2</p>
<p>E-5 Reading</p> <p>Put the Subject Completion Sheet in front of the subject, point to E-5 and say: “Please read the first printed question on this page, and do what it says.” If the subject is not able to touch their nose with their thumb, write “CLOSE YOUR EYES.” on a sheet of paper and repeat. SCORING: 1 point if the subject does the right action.</p> <p>Then say: “Please read the second line and do what it says.” SCORING: 1 point if the subject correctly spells their first name.</p> <p>Maximum score of 2 for both items.</p>	<p><input type="checkbox"/> touch nose with thumb</p> <p><input type="checkbox"/> spell name</p> <p>___/2</p>
<p>E-6 Word finding</p> <p>Examiner considers this interview alone, and whether subject had significant word finding difficulties or substitutions.</p> <p>2: Fluent speech, no word substitutions or approximations 1: Some difficulties with word finding – may be circumlocutions (“that thing you write with”) or clichés (“thingy”, “whatsit”), occasional substitutions or approximations (paraphasias) 0: Significant problems locating correct words, frequent substitutions, neologisms, and/or paraphasic errors.</p> <p>SCORING: Score based on the table above. Maximum score is 2.</p>	<p>___/2</p>
<p>LANGUAGE TOTAL</p>	<p>___/20</p>
<p>NUCOG TOTAL SCORE</p>	<p>___/100</p>

NUCOG

SUBJECT COMPLETION SHEET

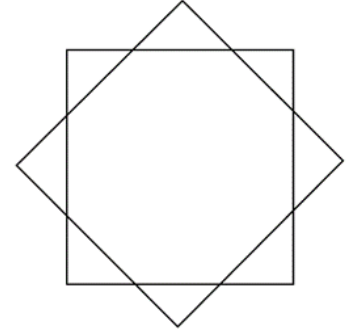
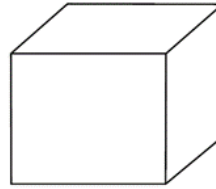
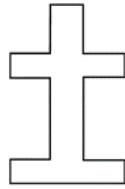
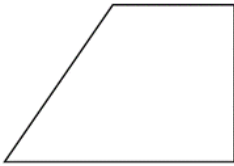
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Date of birth:

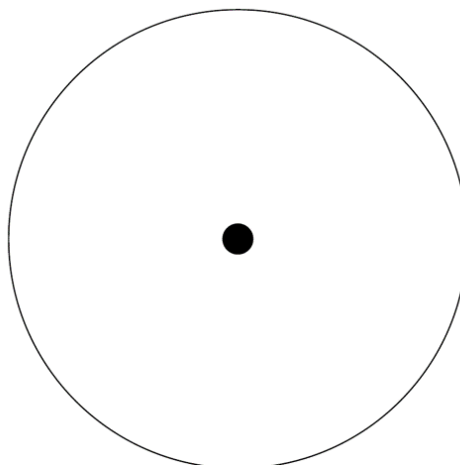
Sex: M / F

Date of assessment:

B-1 Drawing reproduction



B-4 Neglect



C-2 Spatial recall

E-4 Writing

First sentence:

Second sentence:

E-5 Reading

**TOUCH YOUR NOSE
WITH YOUR THUMB**

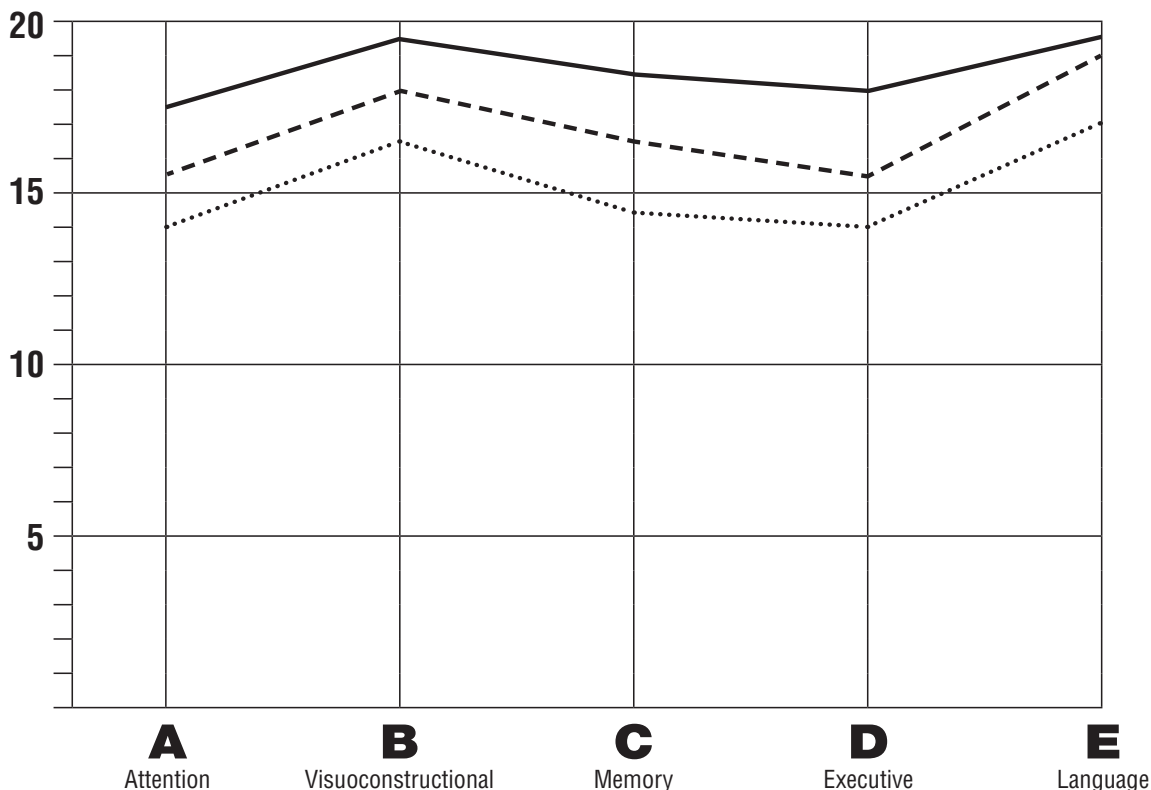
SPELL YOUR FIRST NAME

NUCOG

COGNITIVE PROFILE

Name _____
 Date of birth _____ Sex _____
 Unit _____
 Date of assessment _____

Score



- Normal group
- - - 1 SD below the normal group; requires more in-depth assessment
- 2 SD below the normal group; indicates a problem in the specific domain or overall cognitive functioning

NUCOG Score:

Notes

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