



### SECTION 3 – Current Symptoms

These questions refer to any difficulties experienced within the last six months.

		Never	Rarely	Sometimes	Frequently	Always
A1	Do they have problems maintaining their focus on a single task?	0	1	2	3	4
A2	Are they easily distracted from a task or conversation? (e.g. driving, reading newspaper, cooking)	0	1	2	3	4
A3	Do they have problems doing more than one thing at a time?	0	1	2	3	4
A4	Do they make mistakes without realizing it?	0	1	2	3	4
A5	Do they get confused about where they are, or what the day or time of day is?	0	1	2	3	4

INTERVIEWER USE ONLY A SCORE : \_\_\_\_/20

B1	Do they have problems dressing themselves? (e.g. putting clothes back to front, trouble with laces or buttons)	0	1	2	3	4
B2	Do they have problems operating familiar tools or objects? (e.g. the oven/microwave, television, household tools, personal care)	0	1	2	3	4
B3	Do they have difficulties finding their way around unfamiliar places?	0	1	2	3	4
B4	Have they had problems recognizing familiar faces or objects?	0	1	2	3	4
B5	Do they get left and right mixed up?	0	1	2	3	4

INTERVIEWER USE ONLY B SCORE : \_\_\_\_/20

C1	Have they had difficulties with their memory? (e.g. forgetting appointments, asking things repeatedly, not turning things off)	0	1	2	3	4
C2	Have they had problems getting lost?	0	1	2	3	4
C3	Do they misplace things?	0	1	2	3	4
C4	Do they forget conversations they had recently?	0	1	2	3	4
C5	Do they forget people's names?	0	1	2	3	4

INTERVIEWER USE ONLY C SCORE : \_\_\_\_/20

D1	Do they have difficulty organizing themselves in day-to-day activities?	0	1	2	3	4
D2	Have they had problems with social interactions with others? (e.g. over-friendly, invading personal space, social withdrawal)	0	1	2	3	4
D3	Have they had difficulties in complex everyday tasks? (e.g. mowing the lawn, managing bills, driving the car)	0	1	2	3	4
D4	Have they made decisions or behaved out of character? (e.g. spending money, forming inappropriate relationships)	0	1	2	3	4
D5	Have they had difficulties coping with change in their routine?	0	1	2	3	4

INTERVIEWER USE ONLY D SCORE : \_\_\_\_/20

E1	Do they have difficulty in understanding what is being said?	0	1	2	3	4
E2	Do they have difficulties with writing or spelling?	0	1	2	3	4
E3	Do they have problems understanding what they read? (e.g. newspaper or magazine articles, letters or bills)	0	1	2	3	4
E4	Have they had problems finding the right word in conversation?	0	1	2	3	4
E5	Have they had difficulties in pronouncing words correctly?	0	1	2	3	4

INTERVIEWER USE ONLY E SCORE : \_\_\_\_/20

HOW LONG DID IT TAKE YOU TO COMPLETE THIS FORM? \_\_\_\_ mins

INTERVIEWER USE ONLY SYMPTOM SCORE : \_\_\_\_/100

V SCALE 0 ————— 1 ————— 2 ————— 3 ————— 4 ————— 5

**THANK YOU VERY MUCH FOR COMPLETING THIS QUESTIONNAIRE.**