

Subject I.D. SUBID

CLINICAL DIAGNOSTIC ASSESSMENT PROCEDURE FOR DEMENTIA
TWO-YEAR FOLLOW UP
(INDIANAPOLIS/IBADAN COMPARATIVE PREVALENCE STUDY)

used by I clinical assessment
people who had a CA at P.
If no CA at P, used P form.

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INFORMANT INTERVIEW

A. SUBJECT'S INFORMATION:

Subject I.D. # SUBID

Interviewer's Initials: INTCODE

NAME OF SUBJECT:

Date of Interview: INTDATE
mo day year

SUBFIRST MIDINIT SUBLAST
First MI Last

STREET APTNO
Street

CITY STATE ZIP
City State Zipcode

() PHONE

1. Name of subject's physician SUBPHYS

2. Marital status: MARITAL

- Never Married _____
- Married or Common Law _____
- Separated _____
- Divorced _____
- Widowed _____
- Unknown _____

3. Living arrangements: HOUSECOMP

- Alone _____
- With spouse _____
- With spouse & other _____
- With family, no spouse _____
- Other () _____

4. Residence: RESID

- Nursing Home/Skilled _____
- Assisted/Supervised _____
- Independent Living _____
- Private Residence _____
- Other _____

5. Has the subject's place of residence changed in the last 12 months? CHNGRES
_____ Yes _____ No

6. Education: Years completed GRADE

7. Primary Occupation: OCCUP1
How long? _____ years OCC1YR

Secondary Occupation: OCCUP2
How long? OCC2YR years

B. INFORMANT INFORMATION

1. Informant's Name:

RELFIRST RELMID RELLAST
First MI Last

RELSTREE RELAPT
Street

RELCITY RELSTATE RELZIP
City State Zipcode

() RELPHONE

2. Relation to subject: RELSUBJ

Spouse	_____	Sister	_____	Friend	_____
Daughter	_____	Brother	_____	Other	_____
Son	_____	Other kin	_____		

3. Does informant live with the subject? RELRESID

Yes _____
No _____
DK _____
NA _____

4. How often does informant see subject? OFTSEE

_____ Daily
_____ Weekly
_____ 2-3 times a month
_____ Several times a year
_____ Contact primarily by mail or telephone

5. How long has informant known subject? _____ years LONGKNOW

MEMORY

I would now like to ask you some questions regarding _____
(subject's name)
present difficulties. Not all of these questions will apply to (subject).
However, in order to gain a better understanding of the illness we need to
ask about these symptoms.

INSTRUCTIONS FOR INTERVIEWER: For the questions which require
the distinction between slight and great difficulties apply the
following criteria.

"Slight" means the subject is able to perform the task most of
the time but makes some mistakes.

"Great" means the subject is unable to perform the task on all
or almost all occasions.

I would first like to ask you some questions about _____ memory.
(subject's name)

1. Has there been any decline in his/her memory? Is he/she not
able to remember as well as he/she did in the past?

MEMDECK

Yes _____
No _____
Don't know (DK) _____
Not applicable (NA) _____

- 1a. Does (subject) have difficulty remembering a short list of items
(e.g. shopping list or retrieving three items from another room
without writing it down)?

FRGTWIST

No Difficulty _____
Slight Difficulty _____
Great Difficulty _____
DK _____
NA _____

2. Does (subject) have difficulty remembering recent events, e.g.
when he/she last saw you, or what happened the day before?

FRGTEVNT

No Difficulty _____
Slight Difficulty _____
Great Difficulty _____
DK _____
NA _____

Memory - Cont'd.

3. Does (subject) have difficulty interpreting surroundings, e.g. knowing where he/she is, or discriminating between different types of people, such as doctors, visitors, relatives?

DIFINTER

No Difficulty _____
Slight Difficulty _____
Great Difficulty _____
DK _____
NA _____

4. Does (subject) have difficulty finding his/her way about at home, e.g. can he/she find his/her way to the bathroom or kitchen?

LOSTHOME

No Difficulty _____
Slight Difficulty _____
Great Difficulty _____
DK _____
NA _____

5. Does (subject) have difficulty finding his/her way around the neighborhood, e.g. can he/she find his/her way to the post office, market, church or other relatives/friends homes?

LOSTCOMM

No Difficulty _____
Slight Difficulty _____
Great Difficulty _____
DK _____
NA _____

6. Does (subject) get lost/disoriented in new places?

DISORIEN

No Difficulty _____
Slight Difficulty _____
Great Difficulty _____
DK _____
NA _____

7. Does (subject) have difficulty remembering appointments?

FRGTAPPT

No Difficulty _____
Slight Difficulty _____
Great Difficulty _____
DK _____
NA _____

8. Does (subject) have difficulty remembering family events or occasions?

FRGTOCCA

No Difficulty _____
Slight Difficulty _____
Great Difficulty _____
DK _____
NA _____

Memory - Cont'd.

9. Does (subject) have difficulty remembering to take his/her medications?

FRGTMED 1

No Difficulty _____
Slight Difficulty _____
Great Difficulty _____
DK _____
NA _____

10. Does (subject) tend to live in the past?

LIVEPAST

No _____
Sometimes _____
Often _____
DK _____
NA _____

11. Does (subject) frequently repeat questions?

RPTQSTNS

Yes _____
No _____
DK _____
NA _____

12. Does (subject) repeat stories?

RPTSTRYS

Yes _____
No _____
DK _____
NA _____

INTERVIEWER'S SUMMARY:

13. Is there evidence of memory problems?

MMRYPRBM

Yes _____
No _____
DK _____
NA _____

If responds YES to memory impairment, continue.

13a. From the information provided by the informant, the subject's memory is...

SUBMEMRY

Greatly impaired _____
Slightly impaired _____

14. How long has (subject) been having memory problems?

LONGMMRY

Number of months: _____

Memory - Cont'd.

15. Did these problems start...

PRBMSTRT

Suddenly, within 1-3 months _____
Subacutely, within 3-6 months _____
Insidiously, greater than 6 months _____
DK _____
NA _____

16. Was the progression of the memory problems...

MMRYPGSN

Gradually progressive _____
Stepwise progressive _____
Leveled off since onset _____
DK _____
NA _____

17. Have the memory problems improved since onset?

MMRYIMPV

Yes _____
No _____
DK _____
NA _____

17a. Since the subject's initial visit, memory is...

MEMSAME

the same _____
slightly worse _____
worse _____
a great deal worse _____

LANGUAGE

Now I want to ask some questions about (subject's) language abilities.

18. Has there been a decline in the way (subject) uses language?

LANGDECL

Yes _____
No _____
DK _____
NA _____

18a. When (subject) is speaking, does he/she have difficulty finding the right word?

FINDWORD

No Difficulty _____
Slight Difficulty _____
Great Difficulty _____
DK _____
NA _____

19. Does he/she frequently use the wrong word?

WRNGWORD

Yes _____
No _____
DK _____
NA _____

Language - Cont'd.

20. Does he/she frequently describe an object because he/she cannot recall the proper name?
DESCOBT
Yes _____
No _____
DK _____
NA _____
21. Does he/she talk less than he/she used to?
TALK LESS
Yes _____
No _____
DK _____
NA _____
22. Is it difficult to follow and understand (subject's) conversation, (excluding physical problems that interfere with speech)?
DIFUNDER
Yes _____
No _____
DK _____
NA _____

INTERVIEWER'S SUMMARY:

23. From the information provided by the informant, is there evidence that the subject is having language impairment?
LANGIMP
Yes _____
No _____
DK _____
NA _____

If responds YES to language impairment, continue.

- 23a. From the information provided by the informant, the subject's use of language is...
SUBLANGU
Greatly impaired _____
Slightly impaired _____
24. How long has the subject been having language problems?
WONGLANG
Record the number of months _____
25. Did the language impairment start...
LANGPRBM
Suddenly, within 1-3 months _____
Subacutely, within 3-6 months _____
Insidiously, greater than 6 months _____
DK _____
NA _____

Language - Cont'd

26. Was the progression of the language impairment

LANG&PGSN

Gradual _____
Stepwise _____
Leveled off since onset _____
DK _____
NA _____

27. Has the language impairment improved since onset?

LANGIMPV

Yes _____
No _____
DK _____
NA _____

27a. Since the subject's initial visit, language is...

SAMELANG

the same _____
slightly worse _____
worse _____
a great deal worse _____

JUDGEMENT AND REASONING

28. Has there been any decline in his/her judgement or ability to reason?
Is he/she not as clear or as sharp as he/she used to be?

MENTDECL

Yes _____
No _____
DK _____
NA _____

29. Does (subject) have difficulty paying attention to and understanding
TV programs?

UNDRSDTV

No Difficulty _____
Slight Difficulty _____
Great Difficulty _____
DK _____
NA _____

30. Does subject have difficulty reading written material (newspapers,
books, magazines, etc.) and discussing the contents?

READNEWS

No Difficulty _____
Slight Difficulty _____
Great Difficulty _____
DK _____
NA _____

Judgement and Reasoning - Cont'd.

31. Does (subject) have difficulty following and understanding conversations?

CONVERSE

No Difficulty _____
Slight Difficulty _____
Great Difficulty _____
DK _____
NA _____

INTERVIEWER'S SUMMARY:

32. From the information provided by the informant, is there evidence that the subject is having problems with judgement and reasoning?

RSNG PRBM

Yes _____
No _____
DK _____
NA _____

If responds YES to judgment and reasoning, continue.

32a. From the information provided by the informant, the subject's judgement and reasoning is...

SUBJUDGE

Greatly impaired _____
Slightly impaired _____

33. How long has the subject been having problems with judgement and reasoning?

LONGRSNG

Record the number of months _____

34. Did the problems with judgement and reasoning start ...

RSNGSTRT

Suddenly, within 1-3 months _____
Subacutely, within 3-6 months _____
Insidiously, greater than 6 months _____
DK _____
NA _____

35. Was the progression of the problems in judgement and reasoning ...

RSNGPRGS

Gradual _____
Stepwise _____
Leveled off since onset _____
DK _____
NA _____

Judgement and Reasoning - Cont'd.

36. Has the problem with judgement and reasoning improved over time?

RSNGIMPV

Yes _____
No _____
DK _____
NA _____

36a. Since the subject's initial visit, judgement and reasoning is...
the same _____

SAMESUDG

slightly worse _____
worse _____
a great deal worse _____

PERSONALITY

37. Have you noticed any changes in (subject's) personality, such as the way (subject) behaves socially?

CNGPERS

Yes _____
No _____
DK _____
NA _____

If yes, please describe:

38. Has there been any noticeable exaggeration in (subject's) normal character?

EXGGCHAR

Yes _____
No _____
DK _____
NA _____

39. Has (subject) become more or less changeable in mood?

CHNGMOOD

No _____
More _____
Less _____
DK _____
NA _____

40. Has (subject) become more or less irritable or angry?

SUBJANGR

No _____
More _____
Less _____
DK _____
NA _____

Personality - Cont'd.

41. Has (subject) shown more or less concern for others?

SHWCNCRN

No _____
More _____
Less _____
DK _____
NA _____

42. Has (subject) gotten involved in difficult or embarrassing situations in public because of his/her behavior?

DFCLTPUB

Yes _____
No _____
DK _____
NA _____

43. Has (subject) become more stubborn or obstinate?

MORSTBBN

Yes _____
No _____
DK _____
NA _____

INTERVIEWER'S SUMMARY:

44. From the information provided by the informant, is there evidence that the subject is having changes in his/her personality?

PRSNCHNG

Yes _____
No _____
DK _____
NA _____

If responds YES to personality changes, continue.

44a. From the information provided by the informant, the subject's personality is...

SUBPERSN

Greatly changed _____
Slightly changed _____

45. How long has the subject been having personality changes?

LONGCHNG

Record the number of months _____

46. Did the personality changes start ...

CHNGSTRT

Suddenly, within 1-3 months _____
Subacutely, within 3-6 months _____
Insidiously, greater than 6 months _____
DK _____
NA _____

Personality - Cont'd.

47. Has the progression of the personality changes been ...

PG&SNCHNG

Gradual _____
Stepwise or _____
Leveled off since onset _____
DK _____
NA _____

48. Have the personality changes improved since onset?

CHNG&IMPV

Yes _____
No _____
DK _____
NA _____

48a. Since the subject's initial visit, personality is...

SAMEPERS

the same _____
slightly worse _____
worse _____
a great deal worse _____

EVERYDAY TASKS

INSTRUCTIONS FOR INTERVIEWER: For the questions which require the distinction between slight and great difficulties, apply the following criteria.

"Slight" means the subject is able to perform the task most of the time but makes some mistakes.

"Great" means the subject is unable to perform the task on all or almost all occasions.

Now I would like to ask some questions about _____ ability to perform everyday tasks. An individual's ability to perform can vary from day to day so answer on the basis of his/her ability over the course of a week.

Food Preparation

49. In the past, how much has (subject) been involved in food preparation?

SUBINVOL

Greatly involved _____
Slightly involved _____
Not at all _____
DK _____

49a. Has there been a decline in (subject's) ability to prepare food?

SUBPREP

Yes _____
No _____
DK _____
NA _____

49b. Does (subject) have difficulty finding food in the pantry, cupboards or refrigerator?

FINDFOOD

No Difficulty _____
Slight Difficulty _____
Great Difficulty _____
DK _____
NA _____

49c. Does (subject) have difficulty planning meals?

PLANMEAL

No Difficulty _____
Slight Difficulty _____
Great Difficulty _____
DK _____
NA _____

Food Preparation - Cont'd.

50. Does (subject) have difficulty preparing meals?
PREPMEAL
No Difficulty _____
Slight Difficulty _____
Great Difficulty _____
DK _____
NA _____

51. Does (subject) have difficulty independently shopping for food?
FOODSHOP
No Difficulty _____
Slight Difficulty _____
Great Difficulty _____
DK _____
NA _____

52. Does (subject) have difficulty assisting with food shopping?
ASSTSHOP
No Difficulty _____
Slight Difficulty _____
Great Difficulty _____
DK _____
NA _____

53. Has (subject) burned food on the stove?
BURNFOOD
No _____
Sometimes _____
Often _____
DK _____
NA _____

54. No question.

55. Does (subject) have difficulty preparing any simple food or drink items such as coffee, tea or cereal?
SMPLFOOD
No Difficulty _____
Slight Difficulty _____
Great Difficulty _____
DK _____
NA _____

INTERVIEWER'S SUMMARY:

56. From the information provided by the informant, is the subject's ability to engage in food preparation ...

FOODPREP Greatly impaired (unable to perform any task) _____

Slightly impaired (not able to perform complex tasks like preparing meals but able to prepare simple foods such as tea or cereal) _____

Not impaired _____

Food Preparation - Cont'd.

IF ANSWER IS "GREATLY" OR "SLIGHTLY IMPAIRED"...

56a. In the opinion of the interviewer, is (subject's) impairment due to physical impediment (e.g. stroke, severe rheumatoid arthritis, blindness, deafness) as distinct from cognitive impairment?

VIEWPREP

Not physical _____
Partly physical _____
Entirely physical _____

If so, list: _____

Chores

57. In the past, how much has the subject been involved in household chores?

SUBCHORE

Greatly involved _____
Slightly involved _____
Not at all _____
DK _____

57a. Has there been a decline in (subject's) ability to perform household chores?

DECLCHOR

Yes _____
No _____
DK _____
NA _____

58. Does (subject) have difficulty managing to keep up with cleaning the house the way he/she did in the past?

CLNHOUSE

No Difficulty _____
Slight Difficulty _____
Great Difficulty _____
DK _____
NA _____

59. Does (subject) have difficulty performing yard work the way he/she did in the past?

YARDWORK

No Difficulty _____
Slight Difficulty _____
Great Difficulty _____
DK _____
NA _____

60. Does (subject) have difficulty performing minor repairs such as changing light bulbs?

CHNCLITE

No Difficulty _____
Slight Difficulty _____
Great Difficulty _____
DK _____
NA _____

Chores - Cont'd.

61. Does (subject) have difficulty maintaining the laundry?
 DOLNDRY
 No Difficulty _____
 Slight Difficulty _____
 Great Difficulty _____
 DK _____
 NA _____

62. Does (subject) have difficulty doing the dishes?
 DODISHES
 No Difficulty _____
 Slight Difficulty _____
 Great Difficulty _____
 DK _____
 NA _____

63. Can (subject) still operate household appliances such as:
Circle answer given:

Vacuum	Yes	No	Dk	NA	VACUUM
Dish Washer	Yes	No	Dk	NA	DISHWASH
Washing Machine	Yes	No	Dk	NA	WASHMACH
Clothes Dryer	Yes	No	Dk	NA	DRYER
Microwave	Yes	No	Dk	NA	MICROWVE
Calculator	Yes	No	Dk	NA	CALCUKTR
VCR	Yes	No	Dk	NA	OPERTVCR
TV	Yes	No	Dk	NA	OPERTTV
Car	Yes	No	Dk	NA	OPERTCAR

INTERVIEWER'S SUMMARY:

64. From the information provided by the informant, is the (subject's) ability to perform household chores _____
 HOUSECHR

Greatly impaired (unable to perform all but the simplest tasks, eg. help with the cleaning with supervision) _____

Slightly impaired (not able to look after the house as independently as he/she use to but still performs some tasks, cleaning, doing dishes, etc.) _____

Not impaired _____

IF ANSWER IS "GREATLY" OR "SLIGHTLY IMPAIRED"...

64a. In the opinion of the interviewer, is (subject's) decline in ability to perform household chores due to physical impediment (e.g. stroke, severe rheumatoid arthritis, blindness, deafness) as distinct from cognitive impairment?
 VIEWCHR
 Not physical _____
 Partly physical _____
 Entirely physical _____

If so, list: _____

FINANCES

I would now like to ask you some questions about _____
ability to handle finances. (subject's name)

65. In the past, how involved has the subject been in managing his/her financial affairs?
MNG&FINNC
Greatly involved _____
Slightly involved _____
Not at all _____
DK _____

65a. Has there been a decline in (subject's) ability to manage his/her financial affairs?
SUBMANAG
Yes _____
No _____
DK _____
NA _____

66. Does (subject) have difficulty purchasing a few items at the store?
BUYITEMS
No Difficulty _____
Slight Difficulty _____
Great Difficulty _____
DK _____
NA _____

67. Does (subject) have difficulty managing a checkbook?
MNG&CHCKS
No Difficulty _____
Slight Difficulty _____
Great Difficulty _____
DK _____
NA _____

68. Does (subject) have difficulty paying monthly bills?
PAYBILLS
No Difficulty _____
Slight Difficulty _____
Great Difficulty _____
DK _____
NA _____

69. Does (subject) have difficulty keeping financial records?
KEEPRCDS
No Difficulty _____
Slight Difficulty _____
Great Difficulty _____
DK _____
NA _____

Finances - Cont'd.

70. Does (subject) have difficulty preparing tax information or insurance claims?

PRPARTAX

No Difficulty _____
Slight Difficulty _____
Great Difficulty _____
DK _____
NA _____

71. Does (subject) have difficulty figuring out the amount of change due back on small items or bills?

FIGRCHNG

No Difficulty _____
Slight Difficulty _____
Great Difficulty _____
DK _____
NA _____

INTERVIEWER'S SUMMARY:

72. From the information provided by the informant, is the (subject's) ability to handle finances ...

HNDLWFNNC

Greatly Impaired (unable to perform even the simplest transaction) _____

Slightly Impaired (able to handle small sums of money but requires assistance in conducting family or personal finances) _____

Not Impaired _____

IF ANSWER IS "GREATLY" OR "SLIGHTLY IMPAIRED"...

72a. In the opinion of the interviewer, is (subject's) decline in ability to manage his/her financial affairs due to physical impediment (e.g. stroke, severe rheumatoid arthritis, blindness, deafness) as distinct from cognitive impairment?

VIEWMNG

Not physical _____
Partly physical _____
Entirely physical _____

If so, list: _____

SOCIAL

Now I would like to ask some questions about (subject's) social functioning.

73. In the past, how much has the subject been involved in social activities?

SUBSOC

Greatly involved _____
Slightly involved _____
Not at all _____
DK _____

73a. Has there been a decline in (subject's) social functioning?

SOCFUNC

Yes _____
No _____
DK _____
NA _____

73b. Does (subject) participate in church or community functions as he/she did in the past?

DCWCHRCH

Yes _____
No _____
DK _____
NA _____

74. Is (subject) able to recognize and recall the names of the following people:

Circle answer given:

New Acquaintances
Old Friends
1st. Degree relatives
Spouse

Yes No Dk NA RC&N7NEW
Yes No Dk NA RC&N7OLD
Yes No Dk NA RC&N7REL
Yes No Dk NA RC&N7SPS

75. Does (subject) converse with friends and acquaintances in an appropriate manner?

CNV5FRND

Yes _____
No _____
DK _____
NA _____

76. Does (subject) participate in family celebrations and holidays as he/she did in the past?

DCWHLIDY

Yes _____
No _____
DK _____
NA _____

Social - Cont'd.

77. Does (subject) participate in hobbies (card playing, sewing, fishing) as he/she did in the past?

DCNHOBBY

Yes _____
No _____
DK _____
NA _____

78. Has (subject) lost any special skill or interest or hobby that he/she could perform before (e.g. playing a musical instrument, woodworking, sewing, painting)?

WSTNTRST

Yes _____
No _____
DK _____
NA _____

INTERVIEWER'S SUMMARY:

79. From the information provided by the informant is (subject's) ability to engage in social activities ...

SOCACTVY

Greatly Impaired (unable to engage in any social dialogue except in a very simple manner when accompanied by a relative) _____

Slightly Impaired (some loss of skills but still participates in individual or group gatherings) _____

Not Impaired _____

IF ANSWER IS "GREATLY" OR "SLIGHTLY IMPAIRED"...

79a. In the opinion of the interviewer, is (subject's) decline in social functioning due to physical impediment (e.g. stroke, severe rheumatoid arthritis, blindness, deafness) as distinct from cognitive impairment?

VIEWSOC

Not physical _____
Partly physical _____
Entirely physical _____

If so, list: _____

PERSONAL CARE

86. Does he/she have difficulty feeding him/herself?

FEEDSELF

Feeds self without assistance _____

Feeds self with minor assistance, requires prompting to sample all foods or prepare a plate of food _____

Feeds self with much assistance, has difficulty managing utensils, often uses fingers _____

Has to be fed _____

87. Does he/she have difficulty dressing?

DRESSELF

Unaided _____

Occasionally misplaces buttons, etc., requires minor help _____

Wrong sequence, forgets items, requires much assistance _____

Unable to dress _____

88. Does he/she have difficulty taking care of his/her personal hygiene?

HYGIENE

Clean, cares for self at toilet _____

Occasional incontinence, or needs to be reminded to toilet _____

Frequent incontinence, or needs much assistance _____

Little or no control _____

INTERVIEWER'S SUMMARY:

89. Is there evidence of problems in (subject's) personal care?

PRSNLCRE

Yes _____

No _____

DK _____

NA _____

If responds YES to personal care, continue.

90. How long has (subject) been having problems with personal care?

LONGCARE

Number of months _____

91. Did these problems start ...

STRTCARE

Suddenly, within 1-3 months _____

Subacutely, within 3-6 months _____

Insidiously, greater than 6 months _____

DK _____

NA _____

Personal Care - Cont'd.

92. Was the progression of these problems ...

PGSN CARE

Gradual _____
Stepwise or _____
Leveled off since onset _____
DK _____
NA _____

93. Have the problems with personal care improved since onset?

CAREMPRV

Yes _____
No _____
DK _____
NA _____

93a. In the opinion of the interviewer, is the (subject's) impairment due to physical impediment (e.g. stroke, severe rheumatoid arthritis, blindness, deafness) as distinct from cognitive impairment?

VIEWCARE

Not physical _____
Partly physical _____
Entirely physical _____

If so, list: _____

MEDICATIONS

94. The following is a list of the medications that the subject was taking at the time of his/her initial visit. Indicate the current status of each drug.

	Currently taking				Currently taking		
	Yes	No	DK		Yes	No	DK
<u>MED1CURR</u>				<u>MED4CURR</u>			
<u>MED2CURR</u>				<u>MED5CURR</u>			
<u>MED3CURR</u>				<u>MED6CURR</u>			

94a. List any other prescription medications which the subject is currently taking:

<u>CURMEDI1</u>	<u>CURMEDI3</u>
<u>CURMEDI2</u>	<u>CURMEDI4</u>

OVER-THE-COUNTER MEDICATIONS

95. Does (subject) take any over-the-counter medications regularly?

OTCMEDS

Yes _____
 No _____
 DK _____
 NA _____

If yes please list them:

Name: NAME1
 Dose: DOSE1
 Indication: INDCTN1

Name: NAME2
 Dose: DOSE2
 Indication: INDCTN2

96. Did (subject) experience any side effects from any of these medications?

SIDEEFCT

Yes _____
 No _____
 DK _____
 NA _____

If yes, provide a description:

ALCOHOL USE

I would like to ask a few questions regarding _____ use
of alcohol in the past. (subject's name)

97. How often does he/she drink alcoholic beverages?

OFTNDRNK

- Daily or almost daily _____
- 3-4 times a week _____
- Once or twice a week _____
- Less than once a week _____
- Never _____
- DK _____
- NA _____

LIFESTYLE QUESTIONS

98. Does (subject) ever smoke cigarettes, cigars, or a pipe nearly
everyday?

EVRSMOKE

- Yes _____
- No _____
- DK _____
- NA _____

CIRCLE: cigarettes cigars pipe

EVERCIGS EVRCIGAR EVERPIPE

MAJOR DEPRESSIVE SYNDROME

99. During the past 6 months did (subject) ever have a two week
period where he/she was bothered by feeling depressed, sad,
blue, hopeless, down in the dumps, or that he/she didn't enjoy
anything?

HOPELESS

- Yes _____
- No _____
- DK _____
- NA _____

Heart Disease	✓ \		
	N o	Y e s	
MI/Heart Attack			MIHRTHD
CHF			CHFHD
Angina			ANGINAHD
Arrythmia irr heart beat			ARRYTHHD
Other			OTHERHD

Current Medical Illnesses	✓ \		
	N o	Y e s	
High Blood Pressure			HBPMH
Heart Disease			HRTDISM
Seizure Disorder			SEIZEM
Thyroid Disorder			THYRMF
Cancer			CNCRM
Leukemia/Blood Disorder			LEUKBDM
Head Injury w/ LOC			HEDINJM
Anemia			ANEMIAM
Blood Sugar Problem			BLDSUGP
Diabetes			DIABETM
Mental Retardation			MNTLREI
Learning Problems			LRNG&PRI
Nerves			NERVESMF
Depression			DPRSSNM
Electroshock			ESHOCKM*
Cerebrovascular Disease			CBVDISM
Parkinson's Disease			PARKINM
Confusion & Delirium			CLDGDEM
Paranoid Features			PARANOM*
Family History for Dementia			FHDEME
Alcohol/Substance Abuse			SUBABUM
Smoking			SMKINGM
Other			OTHERM*