

CLINICAL DETAILS	Psychiatric Screening Medication for depression or anxiety, seen psychiatrist or psychologist. Recent or childhood stressful life events, family history of mental health issues. Sex drive and functioning.		Physical Symptoms Motor/Sensory, Balance issues. Swallowing. Bladder or bowel issues.		COGNITION, EMOTION & MOTIVATION	Concentration Gives up or is distracted easily. Daydreams. Difficulty driving & talking. Flips between tasks. Falls asleep watching TV. Mind wanders during reading, group conversation. Goes off at tangent in a conversation.		Speech Word-finding – high frequency words, getting stuck OR word substitutions, transient. Returns after a while or with cues. Mispronounces words. Speech comprehension.		
	Sleep Fatigue	Family History of Neurological Disease		Current medication –		Where items are kept at home, supermarket		Memory difficulties when reading, watching TV. Memory worse than Concentration or vv?		
Change in food prefs. Alcohol intake, smoking, recreational drugs	Memory Lapses – how severe, frequent		Repeatedly asks what day it is. Repeats statements/stories 3 or more times a day. (Note that repeating questions may also reflect anxiety)		Navigation problems – way back to, within hotel if on holiday. After shopping – finding car.		Due to memory, cannot now do things did before – ADL, job, hobbies, DIY.		Other Language Reading Writing Spelling Calculation skill	
Headache, Pain, Sex Function & Drive, Dizziness	Forgets deaths of family/friends, pets, people in news. Forgets holidays.		Forget messages. Forget appointments. Forget to take medication.		Uncharacteristic difficulty in learning new gadgets/pieces of equipment					
INSTRUMENTAL ACTIVITIES OF DAILY LIVING & EXECUTIVE FUNCTION	Hobbies, interests, music, sports, achievements, holidays				Education – best / worst subjects, number of exam passes, reading-writing problems				Vision, Hearing, etc. Double vision Visual neglect Photophobia Phonophobia, Tinnitus Smell, Taste	
	Media exposure (TV, radio, papers, internet)				Occupation (first, best, last)					
	Premorbid Strengths / Weaknesses				Medical & Psychiatric History.					
	Family History			R–L Hand		Reading Glasses				
Occupational Adjustment Technical, dealing with people, stressful events. Learning new routines, evidence from superiors or colleagues.									Reality Distortion Hallucinations/confab 'Eyes or ears play tricks...' (things, people, animals). Delusions.	
Mental slowing. Making Decisions. Planning. Dealing with problems.										
Driving & related Accidents/near accid. Navigating familiar & unfamiliar routes. Cope on holidays?									Depressed - Feels sad. Libido down. Seldom laughs. Eating/drinking change Sleep disturbed, Suicidal. Indecisive. -ve about past, future. Tearful. a.m. worse. Lost interest in pastimes, leisure and appearance.	
Cooking & for several people. Leaves equipment on.										
Change in ability to use TV, DIY equipment, kitchen appliances									Motivation Past hobbies/pastimes Hygiene, cleanliness Change of clothes. Eating	
Make/answer phone calls. Use all features of mobile phone.										
Use of computer, internet, email									Tolerance level Verbal - anger Physical - aggression	
Shopping in shops and online. Handling coins. Dealing with bills, bank accounts. Understanding of legal matters.										
Eating habits and preferences. Table manners.									Anxiety General Anxiety Situation-specific Anxiety	
Dressing - ability, appropriate										
Lacks judgement when buying items, responding to offers, gambling	1. Doctors seen before – names, when, content. Drug history – what, when		Tests, Scans, etc – when & am/pm, duration, who else was there 2. What had for lunch / supper yesterday		3. Recent holidays/trips – when, incidents-events from episode or journey to/from. Weddings/funerals attended		4. Ages – self, spouse, children, grand-children (& names)		5. Day Month Year (Date)	
Any activities others have had to over	6. Reading books - ask for title, author, content of current book or last one read. TV programme recently watched.								Functional Disorder <i>Effects of hypervigilance, fatigue, pain, stress. How states of mind can produce physical symptoms.</i> <i>What it is not – life-threatening or psychiatric disorder.</i> <i>Possibility for improvement with therapy. Software-hardware, car / piano out of tune analogy.</i>	
Social skills	7. Provide names of personalities who have diedask what famous for, whether alive, and if say died, how they died. For example, Princess Diana, Margaret Thatcher, Osama Bin Laden, UK Queen. Note media exposure.									
<i>After poor performance on a test, ask about concentration during that test.</i>	8. Prime Ministers & US Presidents in recent years; Royal family members 9. 9/11, COVID, other recent items in the news									
	MALINGERING-I. If appropriate, warn beforehand about need for maximum effort & that poor effort can be detected. Establish good rapport. Bad news, some scores very low. Good news, low scores due to non-neuro treatable factors.		MALINGERING-II. Perhaps due to the stress they are going through, some find it difficult to be fully engaged and to stay motivated during testing, and this can affect their concentration and the amount of effort they put into a test. Do you think this applied in your case?		Anger – S.T.O.P. Stop.Think. Other Perspectives. Other Possible actions. Refrain, Reframe, Remove mentally/physically from situation					
<i>Say to the patient they have 'done well' to be Patient, Positive, Persevere. Encourage them to Accept, Adapt to, Embrace, show Self-Compassion to situation. Cognitive Reframing, Humour, Support Groups / Organizations, Adjust Goals & Expectations. Spiritual or Charitable Activities, Meditation – these need to be advised as appropriate, and with sensitivity to individuals & context.</i>										

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Family setting & adjustment	Memory Lapses – how severe, frequent									Repeatedly asks what day it is. Repeats statements/stories 3 or more times a day. (Note that repeating questions may also reflect anxiety)	
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Headache, Pain, Sex Function & Drive, Dizziness	Hobbies, interests, music, sports, achievements, holidays Media exposure (TV, radio, papers, internet)		Occupation (first, best, last) Premorbid Strengths / Weaknesses		R–L Hand		Reading Glasses				
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	Mental slowing. Making Decisions. Planning. Dealing with problems.								Depressed - Feels sad. Libido down. Seldom laughs. Eating/drinking change Sleep disturbed, Suicidal. Indecisive. -ve about past, future. Tearful. a.m. worse. Lost interest in pastimes, leisure and appearance.		
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Make/answer phone calls. Use all features of mobile phone.										PTSD Flashbacks Nightmares Avoidance	
Use of computer, internet, email										Disinhibition/ Impulsivity Verbal, social, financial, toilet, sexual. Eating, drinking.	
Shopping in shops and online. Handling coins. Dealing with bills, bank accounts. Understanding of legal matters.										Obsessionality/ Stereotyped Behaviour Obsessional thinking/ruminations	
Eating habits and preferences. Table manners.										Emotional Lability Spontaneous or triggered by event	
Dressing - ability, appropriate		INFORMAL MEMORY ASSESSMENT IS OUTLINED BELOW. IF THE PERSON IS BEING SEEN EVERY FEW DAYS/WEEKS, YOU CAN ALSO TEST MEMORY FOR SPECIFIC ACTIONS CARRIED OUT OR TOPICS COVERED IN EARLIER MEETINGS.									
Lacks judgement when buying items, responding to offers, gambling		1. Doctors seen before – names, when, content. Drug history – what, when		Tests, Scans, etc – when & am/pm, duration, who else was there 2. What had for lunch / supper yesterday		3. Recent holidays/trips – when, incidents-events from episode or journey to/from. Weddings/funerals attended		4. Ages – self, spouse, children, grand-children (& names)		5. Day Month Year (Date)	
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