

Clinical Dementia Rating Worksheet

This is a semi-structured interview. Please ask all of these questions. Ask any additional questions necessary to determine the patient's Clinical Dementia Rating (CDR). Please note information from the additional questions.

Memory Questions for Informant:

1. Does he/she have a problem with his/her memory or thinking? Yes No
- 1a. If yes, is this a consistent problem (as opposed to inconsistent)? Yes No
2. Can he/she recall recent events? Usually Sometimes Rarely
3. Can he/she remember a short list of items (shopping)? Usually Sometimes Rarely
4. Has there been some decline in memory during the past year? Yes No
5. Is his/her memory impaired to such a degree that it would have interfered with his/her activities of daily life a few years ago (or pre-retirement activities)? (collateral sources opinion) Yes No
6. Does he/she completely forget a major event (e.g., trip, party, family wedding) within a few weeks of the event? Usually Sometimes Rarely
7. Does he/she forget pertinent details of the major event? Usually Sometimes Rarely
8. Does he/she completely forget important information of the distant past (e.g., date of birth, wedding date, place of employment)? Usually Sometimes Rarely
9. Tell me about some recent event in his/her life that he/she should remember. (For later testing, obtain details such as location of the event, time of day, participants, how long the event was, when it ended and how the patient or other participants got there).
 Within 1 week: _____

 Within 1 month: _____

10. When was he/she born? _____
11. Where was he/she born? _____
12. What was the last school he/she attended? _____
 Name _____
 Place _____
 Highest level achieved _____
13. What was his/her main occupation/job (or spouse's job if patient was not employed)? _____
14. What was his/her last major job (or spouse's job if patient was not employed)? _____
15. When did he/she (or spouse) retire and why? _____

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Orientation Questions for Informant:

How often does he/she know of the exact:

1. Date of the Month?

Usually Sometimes Rarely Don't Know

2. Month?

Usually Sometimes Rarely Don't Know

3. Year?

Usually Sometimes Rarely Don't Know

4. Day of the Week?

Usually Sometimes Rarely Don't Know

5. Does he/she have difficulty with time relationships (when events happened in relation to each other)?

Usually Sometimes Rarely Don't Know

6. Can he/she find his/her way about familiar streets?

Usually Sometimes Rarely Don't Know

7. How often does he/she know how to get from one place to another outside his/her neighborhood?

Usually Sometimes Rarely Don't Know

8. How often can he/she find his/her way about indoors?

Usually Sometimes Rarely Don't Know

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Judgment and Problem Solving Questions for Informant:

1. In general, if you had to rate his/her abilities to solve problems at the present time, would you consider them:

- As good as they have ever been
- Good, but not as good as before
- Fair
- Poor
- No ability at all

2. Rate his/her ability to cope with small sums of money (e.g., make change, leave a small tip):

- No loss
- Some loss
- Severe loss

3. Rate his/her ability to handle complicated financial or business transactions (e.g., balance check-book, pay bills):

- No loss
- Some loss
- Severe loss

4. Can he/she handle a household emergency (e.g., plumbing leak, small fire)?

- As well as before
- Worse than before because of trouble thinking
- Worse than before, another reason (why) _____
- _____
- _____

5. Can he/she understand situations or explanations?

- Usually Sometimes Rarely Don't Know

6. Does he/she behave* appropriately [i.e., in his/her usual (premorbid) manner] in social situations and interactions with other people?

- Usually Sometimes Rarely Don't Know

*This item rates behavior, not appearance.

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Community Affairs Questions for Informant:

Occupational

1. Is the patient still working? Yes No N/A
 If not applicable, proceed to item 4
 If yes, proceed to item 3
 If no, proceed to item 2
2. Did memory or thinking problems contribute to the patient's decision to retire? (Question 4 is next) Yes No Don't Know
3. Does the patient have significant difficulty in his/her job because of problems with memory or thinking?
 Rarely or Never Sometimes Usually Don't Know

Social

4. Did he/she ever drive a car? Yes No
 Does the patient drive a car now? Yes No
 If no, is this because of memory or thinking problems? Yes No
5. If he/she is still driving, are there problems or risks because of poor thinking? Yes No
- *6. Is he/she able to independently shop for needs?
 Rarely or Never (Needs to be accompanied on any shopping trip) Sometimes (Shops for limited number of items; buys duplicate items or forgets needed items) Usually Don't Know
7. Is he/she able to independently carry out activities outside the home?
 Rarely or Never (Generally unable to perform activities without help) Sometimes (Limited and/or routine, e.g., superficial participation in church or meetings; going to the barber) Usually (Meaningful participation in activities, e.g., voting) Don't Know
8. Is he/she taken to social functions outside a family home? Yes No
 If no, why not? _____
9. Would a casual observer of the patient's behavior think the patient was ill? Yes No
10. If in nursing home, does he/she participate well in social functions (thinking)? Yes No

IMPORTANT:

Is there enough information available to rate the patient's level of impairment in community affairs?

If not, please probe further.

Community Affairs: Such as going to church, visiting with friends or family, political activities, professional organizations such as law society, other professional groups, social clubs, service organizations, educational programs.

***Please add notes if needed to clarify patient's level of functioning in this area.**

Clinical Dementia Rating Worksheet

Home and Hobbies Questions for Informant:

- 1a. What changes have occurred in his/her abilities to perform household chores? _____

- 1b. What can he/she still do well? _____

- 2a. What changes have occurred in his/her abilities to perform hobbies? _____

- 2b. What can he/she still do well? _____

3. If in nursing home, what can he/she no longer do well (home and hobbies)? _____

Everyday Activities (as in Blessed Dementia Scale):

- | | No Loss | | Severe Loss |
|---------------------------------------|---------|-----|-------------|
| 4. Ability to perform household tasks | 0 | 0.5 | 1 |

Please describe: _____

5. Is he/she able to perform household chores at the level of:
(Pick one. Informant does not need to be asked directly).

- No meaningful function.
(Performs simple activities, such as making a bed, only with much supervision)
- Functions in limited activities only.
(With some supervision, washes dishes with acceptable cleanliness; sets table)
- Functions independently in some activities.
(Operates appliances such as a vacuum cleaner; prepares simple meals)
- Functions in usual activities but not at usual level.
- Normal function in usual activities.

IMPORTANT:

Is there enough information available to rate the patient's level of impairment in HOME & HOBBIES?

If not, please probe further.

Homemaking Tasks: Such as cooking, laundry, cleaning, grocery shopping, taking out garbage, gardening, simple maintenance, and other daily living tasks.

Hobbies: Sewing, painting, handicrafts, reading, entertaining, photography, horticulture, going to cinema or symphony, woodworking, participation in sports.

Clinical Dementia Rating Worksheet

Personal Care Questions for Informant:

*What is your estimate of his/her mental ability in the following areas:

	Unaided	Occasionally misplaced buttons, etc.	Wrong sequence, commonly forgotten items	Unable to dress
A. Dressing (as in Blessed Dementia scale)	0	1	2	3
	Unaided	Needs prompting	Sometimes needs help	Always or nearly always needs help
B. Washing, grooming	0	1	2	3
	Cleanly; proper utensils	Messily; spoon	Simple solids	Has to be fed completely
C. Eating habits	0	1	2	3
	Normal complete control	Occasionally wets bed	Frequently wets bed	Doubly incontinent
D. Bladder and bowel control (as in Blessed Dementia scale)	0	1	2	3

* A box-score of 1 can be considered if the patient's personal care is impaired from a previous level, even if they do not receive prompting.

Clinical Dementia Rating Worksheet

Memory Questions for Patient:

1. Do you have problems with memory or thinking? Yes No
2. A few moments ago your (spouse, etc.) told me a few recent experiences you had. Will you tell me something about those? (Prompt for details, if needed such as location of the event, time of day, participants, how long the event was, when it ended and how the patient or other participants got there).

Within 1 week

1.0 – Largely correct _____

0.5 _____

0.0 – Largely incorrect _____

Within 1 month

1.0 – Largely correct _____

0.5 _____

0.0 – Largely incorrect _____

3. I will give you a name and address to remember for a few minutes. Repeat this name and address after me: (Repeat until the phrase is correctly repeated or to a maximum of three trials).

Elements	1	2	3	4	5
	John	Brown,	42	Nathan Road,	Mongkok
	John	Brown,	42	Nathan Road,	Mongkok
	John	Brown,	42	Nathan Road,	Mongkok

(Underline elements repeated correctly in each trial).

4. When were you born? _____
5. Where were you born? _____
6. What was the last school you attended?
 Name _____
 Place _____ Highest level achieved _____
7. What was your main occupation job (or spouse's job if not employed)? _____
8. What was your last major job (or spouse's job if not employed)? _____
9. When did you (or spouse) retire and why? _____

10. Repeat the name and address I asked you to remember:
- | Elements | 1 | 2 | 3 | 4 | 5 |
|----------|------|--------|----|--------------|---------|
| | John | Brown, | 42 | Nathan Road, | Mongkok |

(Underline elements repeated correctly).

Clinical Dementia Rating Worksheet

Orientation Questions for Patient:

Record the patient's answer verbatim for each question:

1. What is the date today?

Correct Incorrect

2. What day of the week is it?

Correct Incorrect

3. What is the month?

Correct Incorrect

4. What is the year?

Correct Incorrect

5. What is the name of this place?

Correct Incorrect

6. What district are we in?

Correct Incorrect

7. What time is it?

Correct Incorrect

8. Does the patient know who the informant is (in your judgment)?

Correct Incorrect

Clinical Dementia Rating Worksheet

Judgment and Problem Solving Questions for Patient:

Instructions: If initial response by patient does not merit a grade 0, press the matter to identify the patient's best understanding of the problem. Circle nearest response.

Similarities:

Example: "How are a pencil and pen alike? (answer: writing instruments)"

How are these things alike?"	Patient's Response
1. turnip.....cauliflower (0 = vegetables) (1 = edible foods, living things, can be cooked, etc.) (2 = answers not pertinent; differences; buy them)	_____ _____ _____
2. desk.....bookcase (0 = furniture, office furniture; both hold books) (1 = wooden, legs) (2 = not pertinent, differences)	_____ _____ _____

Differences:

Example: "What is the difference between sugar and vinegar? (answer: sweet vs. sour)"

What is the difference between these things?"

3. lie.....mistake (0 = one deliberate, one unintentional) (1 = one bad the other good – or explains only one) (2 = anything else, similarities)	_____ _____ _____
4. river.....canal (0 = natural - artificial) (2 = anything else)	_____ _____ _____

Calculations:

- | | | |
|---|----------------------------------|------------------------------------|
| 5. How many cents in a dollar? | <input type="checkbox"/> Correct | <input type="checkbox"/> Incorrect |
| 6. How many 20-cent coins in \$6.8? | <input type="checkbox"/> Correct | <input type="checkbox"/> Incorrect |
| 7. Subtract 3 from 20 and keep subtracting 3 from each new number all the way down. | <input type="checkbox"/> Correct | <input type="checkbox"/> Incorrect |

Judgment:

8. Upon arriving in a strange district, how would you locate an organization/company that you need?
- (0 = try the telephone book, try the internet; call a friend who works there)
 (1 = ask the policeman or shopkeeper nearby, call operator (usually will not give address))
 (2 = no clear response)
9. Patient's assessment of disability and station in life and understanding of why he/she is present at the examination (may have covered, but rate here):
- Good Insight
 Partial Insight
 Little Insight

CLINICAL DEMENTIA RATING (CDR)

CLINICAL DEMENTIA RATING (CDR):	0	0.5	1	2	3
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	Impairment				
	None 0	Questionable 0.5	Mild 1	Moderate 2	Severe 3
Memory	No memory loss or slight inconsistent forgetfulness	Consistent slight forgetfulness; partial recollection of events; "benign" forgetfulness	Moderate memory loss; more marked for recent events; defect interferes with everyday activities	Severe memory loss; only highly learned material retained; new material rapidly lost	Severe memory loss; only fragments remain
Orientation	Fully oriented	Fully oriented except for slight difficulty with time relationships	Moderate difficulty with time relationships; oriented for place at examination; may have geographic disorientation elsewhere	Severe difficulty with time relationships; usually disoriented to time, often to place	Oriented to person only
Judgment & Problem Solving	Solves everyday problems & handles business & financial affairs well; judgment good in relation to past performance	Slight impairment in solving problems, similarities, and differences	Moderate difficulty in handling problems, similarities, and differences; social judgment usually maintained	Severely impaired in handling problems, similarities, and differences; social judgment usually impaired	Unable to make judgments or solve problems
Community Affairs	Independent function at usual level in job, shopping, volunteer and social groups	Slight impairment in these activities	Unable to function independently at these activities although may still be engaged in some; appears normal to casual inspection	No pretense of independent function outside home Appears well enough to be taken to functions outside a family home Appears too ill to be taken to functions outside a family home	
Home and Hobbies	Life at home, hobbies, and intellectual interests well maintained	Life at home, hobbies, and intellectual interests slightly impaired	Mild but definite impairment of function at home; more difficult chores abandoned; more complicated hobbies and interests abandoned	Only simple chores preserved; very restricted interests, poorly maintained	No significant function in home
Personal Care	Fully capable of self-care		Needs prompting	Requires assistance in dressing, hygiene, keeping of personal effects	Requires much help with personal care; frequent incontinence

Score only as decline from previous usual level due to cognitive loss, not impairment due to other factors.