Date:	
Patient Initials / ID:	
Clinician:	
Treatment Phase:	



CAI

Cognitive Assessment Interview

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Background Information Section				
PATIENT - DOMAINS	PATIENT - DOMAINS			
		Patient		
Observation/Evaluation				
Appearance - general cleanliness and hygiene, clothing (correctness of clothing for season, neatness, matching colors/prints, fasteners done). Use all sources of information	Make notes:			
Use all sources of information	Record sources:			
Compliance				
Takes medications at correct doses and at correct times as prescribed?				
Medication Changes				
General Orientation				
Time (Day, Year, Date), Place (City, State, Clinic), Person				
Describe patient's living situation				
Is patient experiencing psychotic symptoms, e.g., hallucinations?	Please describe:			
Handedness (Hand used for writing)				
Ask patient to describe relationship to Informant, e.g., mother, case worker, and number of contact hours per week	Record information:			
PATIENT- AND INFORMANT DO				
Relevant History	Patient	Informant		
Recent relevant clinical events, illnesses of the patient, the informant or other family members, significant social or personal events. Major fluctuations in clinical state. [For Follow-up Exam: clinical events since baseline interview]				
Demographics				
Education Level (Years; HS=12)				
Occupation / Student status				
Date of Birth				
Duration of interview	Record in minutes:	Record in minutes:		
Record Notes				

DOMAIN: Working Memory (Short-Term Memory)				
1. Difficulty maintaining newly learn	ed verbal informationin mind for brie	f periods (long enough to use)?		
	et? Do you have trouble recalling telephone n g visits? Do you find you need to write down i			
Patient Examples:	Informant Examples:			
Definit	la familia	0		
Patient N/A 1 2 3 4 5 6 7	Informant N/A 1 2 3 4 5 6 7	Composite N/A 1 2 3 4 5 6 7		
2. Difficulty performing "on the spot	mental manipulations or computation	s?		
Do you have difficulty knowing how much of paying bills or balancing your checkbook?	change to expect when shopping? Do you ha	ave trouble keeping figures in mind while		
Patient Examples:	Informant Examples:			
D				
Patient N/A 1 2 3 4 5 6 7	Informant N/A 1 2 3 4 5 6 7	Composite N/A 1 2 3 4 5 6 7		
N/A 1 2 3 4 3 0 7	N/A 1 2 3 4 3 0 7	N/A 1 2 3 4 3 0 7		
DOMAIN: Attention / Concentr	ation			
3. Problems sustaining concentration	on over time (without distraction)?			
	u take breaks frequently? Do you have troubl gh to read/listen/see a whole article/chapter/p			
Patient Examples:	Informant Examples:			
Patient	Informant	Composite		
N/A 1 2 3 4 5 6 7	N/A 1 2 3 4 5 6 7	N/A 1 2 3 4 5 6 7		
4. Difficulty focusing on select information (if there is not obvious distraction) ?				
Do you have trouble finding what you need at the supermarket? Is it difficult for you to pick out the correct route on a bus map?				
Patient Examples:	Informant Examples:			
Parity	Informati	Company's		
Patient N/A 1 2 3 4 5 6 7	Informant N/A 1 2 3 4 5 6 7	Composite N/A 1 2 3 4 5 6 7		
14/11 1 2 3 7 3 0 1	14/1 2 3 4 3 0 7	14/1 2 3 4 3 0 7		

SEVERITY ANCHOR POINTS				
N/A = Rating not applicable, or insufficient information in Normal, not at all impaired information 2. Minimal cognitive deficits but functioning is generally effective is generally effect on functioning is generally effective.				
4. Moderate cognitive deficits with clear effects on functioning	5. Serious cognitive deficits which interfere with day-to-day functioning	6. Severe cognitive deficits that jeopardize independent living	7. Cognitive deficits are so severe as to present danger to self/others	

DOMAIN. Verbai Learning and Memory (Long-term Memory)				
5. Trouble learning and remembering verbal material?				
have trouble learning and remembering late remember?	ering instructions or other important information or the names of people you meet? Do you ne			
Patient Examples:	Informant Examples:			
Patient	Informant	Composite		
N/A 1 2 3 4 5 6 7	N/A 1 2 3 4 5 6 7	N/A 1 2 3 4 5 6 7		
6. Difficulty recalling recent events ?				
Do you find you have to be reminded by oth been in the news lately?	ners of events that occurred? Do you recall w	hat you had for dinner last night? What's		
Patient Examples:	Informant Examples:			
Patient	Informant	Composite		
N/A 1 2 3 4 5 6 7	N/A 1 2 3 4 5 6 7	N/A 1 2 3 4 5 6 7		
DOMAIN: Reasoning and Prob	lem-Solving			
7. Lack of <u>flexibility</u> in generating alter				
7. Lack of <u>flexibility</u> in generating alter Do you have trouble coming up with alterna	nate plans when needed? tives when your plans are disturbed (e.g., when your plans are disturbed in the plant are disturbed in t	nat if your normal mode of transport was not		
7. Lack of <u>flexibility</u> in generating alter	nate plans when needed? tives when your plans are disturbed (e.g., when your plans are disturbed in the plant are disturbed in t	nat if your normal mode of transport was not		
7. Lack of flexibility in generating alter Do you have trouble coming up with alterna available, or the store you usually go to well Patient Examples:	nate plans when needed? natives when your plans are disturbed (e.g., where closed)? Informant Examples:			
7. Lack of flexibility in generating alter Do you have trouble coming up with alterna available, or the store you usually go to were Patient Examples:	nate plans when needed? ntives when your plans are disturbed (e.g., where closed)? Informant Examples:	Composite		
7. Lack of flexibility in generating alter Do you have trouble coming up with alternate available, or the store you usually go to well patient Examples: Patient N/A 1 2 3 4 5 6 7	nate plans when needed? Itives when your plans are disturbed (e.g., where closed)? Informant Examples: Informant N/A 1 2 3 4 5 6 7			
7. Lack of flexibility in generating alter Do you have trouble coming up with alternate available, or the store you usually go to were patient Examples: Patient N/A 1 2 3 4 5 6 7 8. Problems in situations requiring jud	nate plans when needed? Itives when your plans are disturbed (e.g., where closed)? Informant Examples: Informant N/A 1 2 3 4 5 6 7 Informant?	Composite N/A 1 2 3 4 5 6 7		
7. Lack of flexibility in generating alter Do you have trouble coming up with alternate available, or the store you usually go to well Patient Examples: Patient N/A 1 2 3 4 5 6 7 8. Problems in situations requiring jude What would you do if (your power went of out)?	Informant N/A 1 2 3 4 5 6 7 gment? utyou were locked out of your homeyour	Composite N/A 1 2 3 4 5 6 7		
7. Lack of flexibility in generating alter Do you have trouble coming up with alternate available, or the store you usually go to were Patient Examples: Patient N/A 1 2 3 4 5 6 7 8. Problems in situations requiring jude What would you do if (your power went of out)? Patient Examples:	Informant N/A 1 2 3 4 5 6 7 Informant Examples:	Composite N/A 1 2 3 4 5 6 7 only sink was clogged a light bulb went		
7. Lack of flexibility in generating alter Do you have trouble coming up with alternate available, or the store you usually go to well Patient Examples: Patient N/A 1 2 3 4 5 6 7 8. Problems in situations requiring jude What would you do if (your power went of out)?	Informant N/A 1 2 3 4 5 6 7 gment? utyou were locked out of your homeyour	Composite N/A 1 2 3 4 5 6 7		

SEVERITY ANCHOR POINTS				
N/A = Rating not applicable, or insufficient information 1. Normal, not at all impaired 2. Minimal cognitive deficits but functioning 3. Mild cognitive deficits with some consistent is generally effective effect on functioning				
4. Moderate cognitive deficits with clear effects on functioning	Serious cognitive deficits which interfere with day-to-day functioning		7. Cognitive deficits are so severe as to present danger to self/others	

DOMAIN: Speed of Processing				
9. Performs tasks slowly?	9. Performs tasks slowly?			
Do you find things take you longer than they should (e.g., performing tasks such as cooking or shopping, assembling materials, reading instructions)?				
Patient Examples:	Informant Examples:			
Patient	Informant	Composite		
N/A 1 2 3 4 5 6 7	N/A 1 2 3 4 5 6 7	N/A 1 2 3 4 5 6 7		

DOMAIN: Social Cognition(Thinking Skills in Social Situations)			
10. Difficulty appreciating another po	erson's intentions/	point of view?	
Do you have trouble understanding other people's point of view (if you disagree with them; even if they don't say it outwardly)? If you are talking and someone looks at their watch, what do you think they may be feeling?			
Patient Examples:		Informant Examples:	
Patient N/A 1 2 3 4 5 6 7	Infor N/A 1 2 3	mant 4 5 6 7	Composite N/A 1 2 3 4 5 6 7

CLINI	CAL GLOBAL IMPRES	SSION OF COGNITIVE IMPAIRMENT		
Considering all sources of information gathered for this patient as compared to a community comparison sample on how the domains of neurocognitive functioning influence daily living, rate global severity of cognitive impairment, how cognitively impaired is this person? (Circle one) GLOBAL SEVERITY OF COGNITIVE IMPAIRMENT – From PATIENT INTERVIEW				
N/A = Not assessed	4 = Moderately impaired	Notes		
1 = Normal, no cognitive impairment	5 = Markedly impaired			
2 = Borderline impairment	6 = Severely impaired			
3 = Mildly impaired	7 = Among the most extremely impaired			
GLOBAL SEVERITY OF CO	GNITIVE IMPAIRMENT – Fron	n INFORMANT INTERVIEW		
N/A = Not assessed	4 = Moderately impaired	Notes		
1 = Normal, no cognitive impairment	5 = Markedly impaired			
2 = Borderline impairment	6 = Severely impaired			
3 = Mildly impaired	7 = Among the most extremely impaired			
GLOBAL SEVERITY OF COGNITIVE IMPAIRMENT – RATER COMPOSITE IMPRESSION				
N/A = Not assessed	4 = Moderately impaired	Notes		
1 = Normal, no cognitive impairment	5 = Markedly impaired			
2 = Borderline impairment	6 = Severely impaired			
3 = Mildly impaired	7 = Among the most extremely impaired			

SEVERITY ANCHOR POINTS				
N/A = Rating not applicable, or insufficient information in 1. Normal, not at all impaired information 2. Minimal cognitive deficits but functioning is generally effective is generally effective in functioning is generally effective.				
4. Moderate cognitive deficits with clear effects on functioning	5. Serious cognitive deficits which interfere with day-to-day functioning	6. Severe cognitive deficits that jeopardize independent living	7. Cognitive deficits are so severe as to present danger to self/others	

GI	obal Assessment of Function – Cognition in Schizophrenia (GAF-CogS)
1	Superior cognitive functioning in a wide range of activities, is sought out to work on cognitively demanding problems, maintains superior level of functioning in a cognitively demanding vocation.
91	
	Absent or minimal cognitive deficits (e.g., occasional lapses of memory or word finding difficulty), good functioning in all cognitive areas, effective functioning and engagement in cognitive tasks, no more than everyday concerns about cognitive performance.
81	
80	If cognitive deficits are present, they are transient and expectable reactions to stressors (e.g., difficulty concentrating after family argument), no more than slight impairment in social, occupational or school functioning due to cognitive deficits.
71	
70	Some mild cognitive symptoms (e.g., difficulty concentrating or memory lapses) OR some difficulty in social, occupational or school functioning due to cognitive problems (e.g., had to
'	repeat a course in college due to cognitive problems).
61	
1.	Moderate cognitive symptoms (e.g., persistent problems paying attention or forgetting of scheduled events) OR moderate difficulty in social, occupational or school functioning due to cognitive problems (e.g., had to take a leave of absence from school).
51	
_	Serious cognitive problems (e.g., continuous problems with attention, memory, or planning)
!	OR any serious impairment in social, occupational or school functioning due to cognitive problems (e.g., family problems caused by deficits, unable to keep a job).
41	
1	Severe cognitive problems interfering with multiple social, occupational, or school functions (e.g., an individual is unable to work in competitive employment, has difficulty in supported employment, and has difficulty assisting with chores at residence).
31	
	Cognitive deficits are so pronounced that they interfere with virtually all aspects of
	functioning, including meaningful communication and goal directed activity (e.g., difficulty sustaining conversation, performing basic activities of daily living).
21	
	Some danger of harm to self or others due to cognitive deficits (gross impairments of
	planning/judgment, failure to recognize consequences of actions, frequently disoriented, wandering, or confused).
11	
	Persistent danger of harm to self or others OR inability to maintain personal hygiene due to
	cognitive deficits (e.g., no meaningful communication, inability to perform even basic self care due to problems organizing behavior)
1	
0	Inadequate information

Global Assessment of Function – Cognition in Schizophrenia			
Study Phase Patient Informant Composite			
Baseline			
Follow-Up			