

30-32 (1) FORM NUMBER

33 (2) VERSION

40 (518) SEQUENCE

SHEP BEHAVIORAL EVALUATION - PART II

These evaluations should be administered at Baseline Visit 2 and at all annual visits, after all other procedures are completed.

1. SHEP ID: (3) 22 23 - (4) 24 25 26 27 - (5) 28 29

2. Acrostic: (6) 41-46

3. a. Date of Clinic Visit: (7) 36 37 38 39 34 35
Month Day Year

b. Type of visit: Baseline Visit 2 1
(8) Annual 2 → Which? (9) 48

c. Date of this evaluation: (10) 51 52 53 54 49 50
Month Day Year

4. Anger 55 (11) Refused 1 Not Done 2

a. Have you felt angry with other people in the past month?
Is this unusual for you?
Felt unusually angry with others 56 (12) true 1 false 2

b. Have you been more irritable (angry) lately?
Is this unusual for you?
Admits to having been more irritable (angry)
than usual lately 57 (13) true 1 false 2

c. How often have you been getting into heated arguments?
Indicates he/she frequently gets into heated arguments 58 (14) true 1 false 2

d. Do you get angry with yourself?
Gets angry with self 59 (15) true 1 false 2

5. Trailmaking Task

60 (16) Refused 1 Not Done 2

Sample A

a. Accurately performed?

61 (17) Yes 1 No 2

↓
Skip to Sample B

Part A--Time: 3 minutes

b. Number of seconds (maximum 180)

(18) 62 63 64

c. Number of points completed

(19) 65 66

d. Number of errors

(20) 67 68

Sample B

e. Accurately performed?

(21) Yes 1 No 2

69

↓
Skip to 6

Part B--Time: 4 minutes

f. Number of seconds (maximum 240)

(22) 70 71 72

g. Number of points completed

(23) 73 74

h. Number of errors

(24) 75 76

6. Digit-Symbol Substitution--Time: 90 Seconds

77 (25) Refused 1 Not Done 2

a. Number of symbols correctly coded

(26) 78 79

b. Number of symbols incorrectly coded

(27) 80 81

7. Addition Task--Time: 2 minutes

82 (28) Refused 1 Not Done 2

a. Total number correct (maximum 60)

(29) 83 84

8. Finding A's Task--Time: 2 minutes

85 (30) Refused 1 Not Done 2

a. Total number of words marked correctly (maximum 100)

(31) 86 87 88

9. Boston Naming Task

89 (32) Refused 1 Not Done 2

PICTURE	CHECK IF CORRECT	SPECIFY IF NOT EXACTLY AS WRITTEN
a. Toothbrush	_____	_____
b. Knocker	_____	_____
c. Accordion	_____	_____
d. Stethoscope	_____	_____
e. Comb	_____	_____
f. Hammock	_____	_____
g. Harp	_____	_____
h. Moose	_____	_____
i. Cactus	_____	_____
j. Scissors	_____	_____
k. Latch	_____	_____
l. Pencil	_____	_____
m. Tongs	_____	_____
n. Wheelchair	_____	_____
o. Camel	_____	_____
p. Wreath	_____	_____
q. Total Correct		(33) 90 91

10. Delayed Recognition Span Task

92 (34) Refused 1 Not Done 2

(Circle correct words)

Sample Verbal Series

Swirl (21) Crown (16) Flake (8)

Verbal Series--Read from left to right

Touch (14) Drift (20) Large (4)
 Climb (15) Month (24) Noise (25)
 Close (29) Trend (11) Place (7)

Participant

1	2	3	4	5	6
7	8	9	10	11	12
13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

Interviewer

Snare (17) Right (13)
 Start (6) Grand (22)
 Bound (26)

a. Total correct before first error

(35) 93 94

b. Total correct overall

(36) 95 96

11. Quality of Life

97 (37) Refused 1 Not Done 2

- a. How do you feel about life as a whole? Would you say that you feel delighted, pleased, mostly satisfied, mixed, mostly dissatisfied, unhappy, or terrible?

Delighted	98	<input type="checkbox"/>	1
Pleased		<input type="checkbox"/>	2
Mostly satisfied	(38)	<input type="checkbox"/>	3
Mixed		<input type="checkbox"/>	4
Mostly dissatisfied		<input type="checkbox"/>	5
Unhappy		<input type="checkbox"/>	6
Terrible		<input type="checkbox"/>	7

- b. Taking all things together, how would you say things are these days? Would you say that you are very happy, pretty happy, or not too happy these days?

Very happy	99	<input type="checkbox"/>	1
Pretty happy		<input type="checkbox"/>	2
Not too happy	(39)	<input type="checkbox"/>	3

- c. For your age, would you say, in general, that your health is excellent, good, fair, poor, or bad?

Excellent		<input type="checkbox"/>	1
Good	100	<input type="checkbox"/>	2
Fair		<input type="checkbox"/>	3
Poor	(40)	<input type="checkbox"/>	4
Bad		<input type="checkbox"/>	5

12. First Recall

101 (41) Refused 1 Not Done 2

"Remember those words you just saw--can you tell me which ones you remember?"

Record words below:

102-103

a. Total words correctly recalled:

(42)

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13. Activities

104 (43) Refused 1 Not Done 2

"I am going to read a list of things people do in their free time. In the last month, how often have you done each of these things--often, sometimes, or never?"

		<u>Often</u>	<u>Sometimes</u>	<u>Never</u>	<u>REF.</u>	<u>DK</u>
a. Active sports or swimming	105 (44) <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8	
b. Take walks	106 (45) <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8	
c. Work in the garden/yard	107 (46) <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8	
d. Do physical exercises	108 (47) <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8	
e. Prepare your meals	109 (48) <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8	
f. Work at a hobby	110 (49) <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8	
g. Go out and do some shopping	111 (50) <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8	
h. Go out to a movie, restaurant, or sporting event	(51) 112 <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8	
i. Read books, magazines, newspapers	113 (52) <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8	
j. Watch television	114 (53) <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8	
k. Day trips, overnight trips	115 (54) <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8	
l. Unpaid community/volunteer work	116 (55) <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8	
m. Paid community work	117 (56) <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8	
n. Regularly play cards/games/bingo	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8	
o. Any other activities (specify) _____	118 (57) <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8	
_____	(58) 119					

14. Second Recall

120 (59) Refused 1 Not Done 2

"Now I would like you to tell me as many of the words you remember that you saw before."

Record words below:

_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

a. Total words recalled correctly:

(60)

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 121-122

15. Letter Sets Task--Time: 5 minutes

123 (61) Refused 1 Not Done 2

a. Number marked correctly

124-125 (62)

b. Number marked incorrectly

126-127 (63)

c. Total score = a - (1/4)b

128-131 (64) .

16. Review--Interviewer only

a. How well do you think the participant understood the questions in the tasks?

Quite well 1
Fairly well 2
Somewhat (65) 3
Very little 4
Not at all 132 5

b. How great an effort do you think the participant put into the tasks?

A great deal 1
A considerable amount 2
A moderate amount (66) 3
A little bit 4
Hardly any 133 5

c. How nervous do you think the participant was about the tasks?

Very much 1
A moderate amount 2
A little (67) 3
Not at all 134 4

d. How often was the participant's behavior toward the interviewer and the interviewing situation appropriate?

Always 1
Often 2
Sometimes (68) 3
Rarely 4
Never 135 5

e. Was the participant's vision impaired to the degree that performance was affected?

136 (69) Yes 1
No 2

f. Was the participant's hearing impaired to the degree that performance was affected?

137 (70) Yes 1
No 2

g. Comments:

138 (71) P O//

h. Interviewer:

139-140 (72)

Signature

RECORD TYPE (73) 141

DATE RECEIVED (74) 142-147

UPDATE NUMBER (75) 148-150

151-156

DATE LAST PROCESSED (76)

PAPER COPY (77) 157

Cross Forms Edit (78) 158

(514) 3-8 BATCH DATE

(515) 11-16 DATE MODIFIED

(516) 17-20 TIME MODIFIED

(517) EDIT STATUS

Code

SH35/6

30-32 (1) FORM NUMBER

33 (2) VERSION

40 (518) SEQUENCE

SHEP BEHAVIORAL EVALUATION - PART II

These evaluations should be administered at Baseline Visit 2 and at all annual visits, after all other procedures are completed.

1. SHEP ID: (3) - (4) - (5) (6) 2. Acrostic:

3. a. Date of Clinic Visit: (7)
Month Day Year

b. Type of visit: Baseline Visit 2 1
(8) Annual 2 → Which? (9)
47

c. Date of this evaluation: (10)
Month Day Year

4. Anger 55 (11) Refused 1 Not Done 2

a. Have you felt angry with other people in the past month?
Felt angry with others 56 (12) true 1 false 2

b. Have you been irritable in the past month?
Admits to having been irritable lately 57 (13) true 1 false 2

c. How often have you been getting into heated arguments?
Indicates he/she frequently gets into heated arguments (14) ⁵⁸ true 1 false 2

d. Do you get angry with yourself?
Gets angry with self 59 (15) true 1 false 2

5. Trailmaking Task

60 (16) Refused 1 Not Done 2

Sample A

a. Accurately performed?

61 (17) Yes 1 No 2

↓
Skip to Sample B

Part A--Time: 3 minutes

b. Number of seconds (maximum 180)

(18) 62 63 64

c. Number of segments completed correctly

(19) 65 66

d. Number of missing segments, up to highest number connected

(20) 67 68

Sample B

e. Accurately performed?

(21) Yes 1 No 2

69

↓
Skip to 6

Part B--Time: 4 minutes

f. Number of seconds (maximum 240)

(22) 70 71 72

g. Number of segments completed correctly

(23) 73 74

h. Number of missing segments, up to highest number or letter connected

(24) 75 76

6. Digit-Symbol Substitution--Time: 90 Seconds 77 (25) Refused 1 Not Done 2

a. Number of symbols correctly coded

(26) 78 79

b. Number of symbols incorrectly coded

(27) 80 81

7. Addition Task--Time: 2 minutes 82 (28) Refused 1 Not Done 2

a. Total number correct (maximum 60)

(29) 83 84

8. Finding A's Task--Time: 2 minutes 85 (30) Refused 1 Not Done 2

a. Total number of words marked correctly (maximum 100)

(31) 86 87 88

9. Boston Naming Task

89

32

Refused 1

Not Done 2

	PICTURE	CHECK IF CORRECT	SPECIFY IF NOT EXACTLY AS WRITTEN
a.	Toothbrush	_____	_____
b.	Knocker	_____	_____
c.	Accordion	_____	_____
d.	Stethoscope	_____	_____
e.	Comb	_____	_____
f.	Hammock	_____	_____
g.	Harp	_____	_____
h.	Noose	_____	_____
i.	Cactus	_____	_____
j.	Scissors	_____	_____
k.	Latch	_____	_____
l.	Pencil	_____	_____
m.	Tongs	_____	_____
n.	Wheelchair	_____	_____
o.	Camel	_____	_____
p.	Wreath	_____	_____
q.	Total Correct		33 90 91

10. Delayed Recognition Span Task

92

34

Refused 1

Not Done 2

(Circle correct words)

Sample Verbal Series

Swirl (21) Crown (16) Flake (8)

Verbal Series--Read from left to right

Touch (14) Drift (20) Large (4) Snare (17) Right (13)
 Climb (15) Month (24) Noise (25) Start (6) Grand (22)
 Close (29) Trend (11) Place (7) Bound (26)

Participant

1	2	3	4	5	6
7	8	9	10	11	12
13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30

Interviewer

a. Total correct before first error

35 93 94

b. Total correct overall

36 95 96

11. Quality of Life

97 (37) Refused 1 Not Done 2

- | | |
|--|---|
| <p>a. How do you feel about life as a whole? Would you say that you feel delighted, pleased, mostly satisfied, mixed, mostly dissatisfied, unhappy, or terrible?</p> | <p>Delighted <input type="checkbox"/> 1
 Pleased 98 <input type="checkbox"/> 2
 Mostly satisfied (38) <input type="checkbox"/> 3
 Mixed <input type="checkbox"/> 4
 Mostly dissatisfied <input type="checkbox"/> 5
 Unhappy <input type="checkbox"/> 6
 Terrible <input type="checkbox"/> 7</p> |
| <p>b. Taking all things together, how would you say things are these days? Would you say that you are very happy, pretty happy, or not too happy these days?</p> | <p>Very happy 99 <input type="checkbox"/> 1
 Pretty happy (39) <input type="checkbox"/> 2
 Not too happy <input type="checkbox"/> 3</p> |
| <p>c. For your age, would you say, in general, that your health is excellent, good, fair, poor, or bad?</p> | <p>Excellent 100 <input type="checkbox"/> 1
 Good <input type="checkbox"/> 2
 Fair (40) <input type="checkbox"/> 3
 Poor <input type="checkbox"/> 4
 Bad <input type="checkbox"/> 5</p> |

12. First Recall

101 (41) Refused 1 Not Done 2

"Remember those words you just saw--can you tell me which ones you remember?"

Record words below:

_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

a. Total words correctly recalled:

(42)

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102-103

13. Activities

104 (43) Refused 1 Not Done 2

"I am going to read a list of things people do in their free time. In the last month, how often have you done each of these things--often, sometimes, or never?"

		Often	Sometimes	Never	REF.	DK
a.	Active sports or swimming	105 (44) <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8
b.	Take walks	106 (45) <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8
c.	Work in the garden/yard	107 (46) <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8
d.	Do physical exercises	108 (47) <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8
e.	Prepare your meals	109 (48) <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8
f.	Work at a hobby	110 (49) <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8
g.	Go out and do some shopping	(50) <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8
h.	Go out to a movie, restaurant, or sporting event	111 (51) <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8
i.	Read books, magazines, newspapers	113 (52) <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8
j.	Watch television	114 (53) <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8
k.	Day trips, overnight trips	115 (54) <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8
l.	Unpaid community/volunteer work	(55) <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8
m.	Paid community work	117 (56) <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8
n.	Regularly play cards/games/bingo	<input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8
o.	Any other activities (specify) _____	118 (57) <input type="checkbox"/> 1	<input type="checkbox"/> 2	<input type="checkbox"/> 3	<input type="checkbox"/> 7	<input type="checkbox"/> 8
	_____	(58) 119				

14. Second Recall

120 (59) Refused 1 Not Done 2

"Now I would like you to tell me as many of the words you remember that you saw before."

Record words below:

_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

a. Total words recalled correctly:
Version 2 - 7/85

(60)

121-122
SH35/5

15. Letter Sets Task--Time: 5 minutes

123 (61) Refused 1 Not Done 2

- a. Number marked correctly 124-125 (62)
- b. Number marked incorrectly 126-127 (63)
- c. Total score = a - (1/4)b 128-131 (64)

16. Review--Interviewer only

- a. How well do you think the participant understood the questions in the tasks?
 - Quite well 1
 - Fairly well 2
 - Somewhat (65) 3
 - Very little 132 4
 - Not at all 5
- b. How great an effort do you think the participant put into the tasks?
 - A great deal 1
 - A considerable amount 2
 - A moderate amount 3
 - A little bit (66) 4
 - Hardly any 133 5
- c. How nervous do you think the participant was about the tasks?
 - Very much 1
 - A moderate amount 2
 - A little 3
 - Not at all 134 (67) 4
- d. How often was the participant's behavior toward the interviewer and the interviewing situation appropriate?
 - Always 1
 - Often 2
 - Sometimes (68) 3
 - Rarely 4
 - Never 135 5
- e. Was the participant's vision impaired to the degree that performance was affected?
 - 136 (69) Yes 1
 - No 2
- f. Was the participant's hearing impaired to the degree that performance was affected?
 - 137 (70) Yes 1
 - No 2
- g. Comments: 138 (71) P %

h. Interviewer:

141 (73) RECORD TYPE 3-8 139-140 (72) Code

142-147 (74) DATE RECEIVED

151-156 (76) (514) Signature DATE LAST PROCESSED BATCH DATE

157 (77) (515) PAPER COPY DATE MODIFIED

158 (78) (516) 17-20 EDIT STATUS CODE TIME MODIFIED

21 (517) EDIT STATUS