

COGNITIVE TESTING REQUEST FORM



Neurodegenerative Disorders Research Pty Ltd
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Patient's name: DOB:

Address: Tel:

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Clinical details:

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<input type="checkbox"/> ADAS COG test <input type="checkbox"/> Clinician Interview Based Impression of Change plus Caregiver Input/ Clinician Interview Based Impression of Severity (CIBIC/CIBIS) test <input type="checkbox"/> Geriatric Depression Scale <input type="checkbox"/> Clinical dementia rating scale and clinical dementia sum of boxes <input type="checkbox"/> Depression Anxiety Stress Scales (DASS), specifically for young adults <input type="checkbox"/> Quality of Life in Alzheimer's disease (QoLAD)	<input type="checkbox"/> Clock drawing test (quantitative) <input type="checkbox"/> Symbol digits modalities test <input type="checkbox"/> Frontal behavioural inventory <input type="checkbox"/> Brief cognitive rating scale <input type="checkbox"/> Global deterioration scale <input type="checkbox"/> Acts of Daily Living Assessment <input type="checkbox"/> Neuropsychiatric inventory <input type="checkbox"/> Modified Hachinski Ischaemia Scale <input type="checkbox"/> Columbia suicide rating scale <input type="checkbox"/> Total functional capacity
Referring Practitioner:	Doctor's signature: Date:

Neurodegenerative Disorders Research Pty Ltd is a not-for-profit research organisation devoted to the understanding of neurodegenerative disorders, in particular as they pertain to younger adults.

Return form to: Fax: 6380 2055 or email: subiac@panegyres.com.au