### Short Description of Instrument:

**Construct measured:** A means whereby the clinician can address clinically relevant change (global measure).

**Means of administration:** Organized but unstructured clinical interview with patient and caregiver.

**Intended respondent:** patient & caregiver.

Comprises two parts (I & II). Part I is baseline evaluation (information from both subject and informant). Part II has forms for both subject and informant.

Part 1 records baseline information and serves as a reference for future ratings. Part II uses informant and subject derived information, obtained separately, from which an impression of change score is made.

**At baseline:**

Parts I and II share a similar format with columns headed “Area” (various areas that might be evaluated for potential change) and “Probes” (sample items that the clinician might find helpful in assessing an area). A third column provides space for taking notes.

**At follow up:**

Part II is administered, with order of interview (subject or informant) kept consistent throughout. The clinician may refer to baseline data to enable a change on the Likert scale (see below) to be completed. The clinician alone must make decisions regarding change, and not consult other staff.

### Scoring:

Seven-point categorical scale that gives a global rating of change in symptoms from a baseline level. The instrument can reflect change in several domains (e.g. cognition, attention and wakefulness, psychiatric symptoms). A score of:

1 = substantial improvement.
2 = moderate improvement.
3 = minimum improvement.
4 = no change.
5 = minimum worsening.
6 = moderate worsening.
7 = substantial worsening.

### References: