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OMB#: 0925-0584
Exp. 8/31/2017

HCHS/SOL - Six Item Cognitive Screener (Bilingual)

ID NUMBER:	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	FORM CODE: SIB	Contact	<input type="text"/>	<input type="text"/>	SEQ #	<input type="text"/>	<input type="text"/>
								VERSION: 1, 6/30/2015	Occasion				0	1

ADMINISTRATIVE INFORMATION

0a. Completion Date: /

0b. Staff ID:

Instructions: Enter the answer given by the participant for each response. Set CDART Field Status to 'Refused', 'No Response', 'Missing', etc. for those questions that do not list these values as possible answer choices.

Introduction: “Before we continue I would like to ask you some questions that will help us to decide the best way to conduct the SOL visit. Specifically, I will ask you to use your memory. I am going to name three objects. Please wait until I say all three words, then repeat them. Remember what they are because I am going to ask you to name them again in a few minutes. Please repeat these words for me: **BLUE – PEAR – SOFA.**”

Introducción: “Antes de continuar, me gustaría hacerle algunas preguntas que nos ayudaran a decidir la mejor manera de conducir su segunda visita al estudio SOL. Le voy a pedir que utilice su memoria. Voy a decir tres palabras. Por favor, espere hasta que yo diga esas tres palabras y luego repítalas. Recuerde cuáles son, porque le voy a pedir que las nombre de nuevo en unos minutos. Por favor, repítame estas palabras: **AZUL – PERA – SOFÁ.**”

Note: Interviewer may repeat names 3 times if necessary. The interview then continues with items 3-5 (“What year is this?”; “What month is this?”; “What is the day of the week?”) and proceeds to ask: “What were those three words I asked you to remember?”

1. Was the task attempted? No Yes →Go to Question 2

a. If no, reason:

Hearing loss

Participant unable to comprehend instructions (cognitive impairment)

Refusal

Other:

a1. Specify: _____

Go to Question 9

2. Were the words repeated correctly?

No →Go to Questions 3, 4, and 5.

Then, record 6, 7, and 8 as “Not Attempted / Refusal”.
Then, Go to Question 9.

Yes

ID NUMBER:								
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FORM CODE: SIB
VERSION: 1 6/30/2015

Contact Occasion		
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SEQ #	0	1
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	Correct or Self- corrected	Incorrect / Don't know	Not Attempted / Refusal
3. "Thank you, now, without looking at a calendar or watch: What year is this?"			
<i>["Gracias, ahora, sin consultar un calendario o un reloj: ¿En qué año estamos?"]</i>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
4. "Without looking at a calendar or watch: What month is this?"			
<i>["Sin consultar un calendario o un reloj: ¿En qué mes estamos?"]</i>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
5. "Without looking at a calendar or watch: What is the day of the week?" (If participant states the date, say: "Good, and what day of the week is it?")			
<i>["Sin consultar un calendario o un reloj: ¿Qué día de la semana es hoy?"] (If participant states the date, say: "Muy bien, ¿y qué día de la semana es?")</i>	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
 "Now, what were those three words I asked you to remember?"			
<i>["Ahora, ¿cuáles fueron las tres palabras que le pedí que recordara?"]</i>			
6. Blue [Azul]	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
7. Pear [Pera]	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
8. Sofa [Sofá]	1 <input type="checkbox"/>	2 <input type="checkbox"/>	3 <input type="checkbox"/>
9. Scoring Result:			