

## INSTRUCTIONS FOR THE NEUROLOGIC HISTORY (NHX) FORM



## I. General Instructions

The purpose of this questionnaire is to evaluate whether the subject has been diagnosed with any neurologic disease in the past. This will help us evaluate the type of cognitive impairment or dementia, in individuals with cognitive problems, or might explain some of their testing, in individuals with a previous neurologic diagnosis. If the participant is unable to answer questions, and has a proxy for consent and other history taking, the proxy should be asked these questions about the subject's medical history. If this is the case, the question should be rephrased, such as "Has {S} ever been told by a doctor or health professional that {he/ she} has or had Parkinson's disease?" (with similar adjustments for all questions).

For items that are answered "yes" there are usually follow-up questions to further identify the nature of the diagnosis and history.

## II. Detailed Instructions for each Item

- Enter the date on which the participant was seen in the clinic. 0a.
- 0b. Enter the staff ID for the person who completed this form.
- 1. If a participant states that he or she was diagnosed with a "Parkinson's-Plus syndrome" (unlikely in more than a couple of participants, and would include "Progressive Supranuclear Palsy", "Corticobasal degeneration", "Shy-Drager Syndrome" or "Multisystem atrophy"), this would be rated as "yes".
- 1a-2a. Record participant responses. Follow indicated skip patterns.
- 2b. If the participant asks for clarification, the examiner can state that long-term problems or dysfunction refers to problems with memory or symptoms that started at the time of the head injury and lasted for a long period of time after.
- 3-3e. Record participant responses. Follow indicated skip patterns.
- 4a-4c. If the participant states that he or she was told that there might be a diagnosis of any of these conditions, try to establish if a doctor actually gave him or her that diagnosis, or if it was just considered while evaluating another condition, or was considered before a different diagnosis was made. To answer "yes" it should be a diagnosis that was made by a physician or health professional, and was not just entertained as part of a diagnostic workup. Record participant responses. Follow indicated skip patterns.
- 4d. If a participant reports having "TIAs," this should be considered a "NO" response. If a participant reports a "mini stroke," the interviewer should ask, "Was this mini-stroke also called a TIA"?. If the participant says no, or the participant is not sure, the response should be "YES". If the participant says yes, the response should be "NO".
- 5-6c. Record participant responses. Follow indicated skip patterns.

## [Items 7 through 13 have been disabled.]

14-16. Record participant responses. Follow indicated skip patterns.