

## **KICA-Carer: COGNITIVE INFORMANT REPORT**

- |  |                     |   |       |
|--|---------------------|---|-------|
| 1. Have you noticed that s/he (name) is forgetting a lot of things?  | <i>no</i>           | 0 |       |
| <i>If yes: Does this happen</i>  | <i>sometimes</i>    | 1 | _____ |
|  | <i>all the time</i> | 2 |       |
| 2. Does s/he forget the names of his family?   | <i>no</i>           | 0 |       |
| <i>If yes: Does this happen</i>  | <i>sometimes</i>    | 1 | _____ |
|  | <i>all the time</i> | 2 |       |
| 3. Does s/he forget what happened yesterday?   | <i>no</i>           | 0 |       |
| <i>If yes: Does this happen</i>  | <i>sometimes</i>    | 1 | _____ |
|  | <i>all the time</i> | 2 |       |
| 4. Does s/he forget where s/he is now?   | <i>no</i>           | 0 |       |
| <i>If yes: Does this happen</i>  | <i>sometimes</i>    | 1 | _____ |
|  | <i>all the time</i> | 2 |       |
| 5. Does s/he say the same thing over and over?   | <i>no</i>           | 0 |       |
| <i>If yes: Does this happen</i>  | <i>sometimes</i>    | 1 | _____ |
|  | <i>all the time</i> | 2 |       |
| 6. Can s/he remember which week is pension week?   | <i>yes</i>          | 0 |       |
| <i>If no: Does this happen</i>   | <i>sometimes</i>    | 1 | _____ |
|  | <i>all the time</i> | 2 |       |
| 7. Does s/he keep walking away and getting lost?   | <i>no</i>           | 0 |       |
| <i>If yes: Does this happen</i>  | <i>sometimes</i>    | 1 | _____ |
|  | <i>all the time</i> | 2 |       |
| 8. Does s/he do things that are wrong in Aboriginal way?<br>(eg. calling out names of people who have passed away) | <i>no</i>           | 0 |       |
| <i>If yes: Does this happen</i>  | <i>sometimes</i>    | 1 | _____ |
|  | <i>all the time</i> | 2 |       |

**KICA-Carer TOTAL SCORE: \_\_\_\_\_ /16**  
*Score ≥ 3/16 further investigations required*