

|                                   |                                  |  |  |
|-----------------------------------|----------------------------------|--|--|
| <b>CNS Vital Signs Report</b>     |                                  | <b>Test Date: December 27, 2017 09:03:06</b> |  |
| Patient ID: Example, Example      |                                  | Administrator: Larry Lyons                   |  |
| Age: 58                           |                                  | Language: English (United States)            |  |
| Total Test Time: 62:41 (min:secs) | CNSVS Duration: 35:01 (min:secs) | Online Version 1.1.0                         |  |

| Patient Profile            | Percentile Range     |                |            |               | > 74  | 25 - 74  | 9 - 24      | 2 - 8   | < 2      |
|----------------------------|----------------------|----------------|------------|---------------|-------|----------|-------------|---------|----------|
|                            | Standard Score Range |                |            |               | > 109 | 90 - 109 | 80 - 89     | 70 - 79 | < 70     |
| Domain Scores              | Patient Score        | Standard Score | Percentile | Valid Score** | Above | Average  | Low Average | Low     | Very Low |
| Neurocognitive Index (NCI) | NA                   | 86             | 18         | Yes           |       |          | X           |         |          |
| Composite Memory           | 84                   | 73             | 4          | Yes           |       |          |             | X       |          |
| Verbal Memory              | 43                   | 71             | 3          | Yes           |       |          |             | X       |          |
| Visual Memory              | 41                   | 87             | 19         | Yes           |       |          | X           |         |          |
| Psychomotor Speed          | 134                  | 75             | 5          | Yes           |       |          |             | X       |          |
| Reaction Time*             | 724                  | 92             | 30         | Yes           |       | X        |             |         |          |
| Complex Attention*         | 8                    | 96             | 40         | Yes           |       | X        |             |         |          |
| Cognitive Flexibility      | 38                   | 92             | 30         | Yes           |       | X        |             |         |          |
| Processing Speed           | 43                   | 88             | 21         | Yes           |       |          | X           |         |          |
| Executive Function         | 38                   | 91             | 27         | Yes           |       | X        |             |         |          |
| Social Acuity              | 11                   | 119            | 90         | Yes           | X     |          |             |         |          |
| Reasoning                  | 4                    | 99             | 47         | Yes           |       | X        |             |         |          |
| Simple Attention           | 40                   | 107            | 68         | Yes           |       | X        |             |         |          |
| Motor Speed                | 91                   | 77             | 6          | Yes           |       |          |             | X       |          |

Domain Dashboard: Above average domain scores indicate a standard score (SS) greater than 109 or a Percentile Rank (PR) greater than 74, indicating a high functioning test subject. Average is a SS 90-109 or PR 25-74, indicating normal function. Low Average is a SS 80-89 or PR 9-24 indicating a slight deficit or impairment. Below Average is a SS 70-79 or PR 2-8, indicating a moderate level of deficit or impairment. Very Low is a SS less than 70 or a PR less than 2, indicating a deficit and impairment. Reaction times are in milliseconds. An \* denotes that "lower is better", otherwise higher scores are better. Patient Scores are raw scores calculations generated from data values of the individual subtests.

VI\*\* - Validity Indicator: Denotes a guideline for representing the possibility of an invalid test or domain score. "No" means a clinician should evaluate whether or not the test subject understood the test, put forth their best effort, or has a clinical condition requiring further evaluation.

| Verbal Memory Test (VBM)   | Score | Standard | Percentile |   |
|----------------------------|-------|----------|------------|---|
| Correct Hits - Immediate   | 8     | 72       | 3          | Verbal Memory test: Subjects have to remember 15 words and recognize them in a field of 15 distractors. The test is repeated at the end of the battery. The VBM test measures how well a subject can recognize, remember, and retrieve words e.g. exploit or attend literal representations or attribute. "Correct Hits" refers to the number of target words recognized. Low scores indicate verbal memory impairment.                           |
| Correct Passes - Immediate | 15    | 110      | 75         |   |
| Correct Hits - Delay       | 6     | 71       | 3          |   |
| Correct Passes - Delay     | 14    | 97       | 42         |   |
| Visual Memory Test (VSM)   | Score | Standard | Percentile |   |
| Correct Hits - Immediate   | 10    | 85       | 16         | Visual Memory test: Subjects have to remember 15 geometric figures, and recognize them in a field of 15 distractors. The test is repeated at the end of the battery. The VIM test measures how well a subject can recognize, remember, and retrieve geometric figures e.g. exploit or attend symbolic or spatial representations. "Correct Hits" refers to the number of target figures recognized. Low scores indicate visual memory impairment. |
| Correct Passes - Immediate | 13    | 112      | 79         |   |
| Correct Hits - Delay       | 6     | 67       | 1          |   |
| Correct Passes - Delay     | 12    | 107      | 68         |   |
| Finger Tapping Test (FTT)  | Score | Standard | Percentile |   |
| Right Taps Average         | 47    | 80       | 9          | The FTT is a test of motor speed and fine motor control ability. There are three rounds of tapping with each hand. The FTT test measures the speed and the number of finger-taps with each hand. Low scores indicate motor slowing. Speed of manual motor activity varies with handedness. Most people are faster with their preferred hand but not always.   |
| Left Taps Average          | 44    | 77       | 6          |   |

|                                   |                                  |  |  |
|-----------------------------------|----------------------------------|--|--|
| <b>CNS Vital Signs Report</b>     |                                  | <b>Test Date: December 27, 2017 09:03:06</b> |  |
| Patient ID: Example, Example      |                                  | Administrator: Larry Lyons                   |  |
| Age: 58                           |                                  | Language: English (United States)            |  |
| Total Test Time: 62:41 (min:secs) | CNSVS Duration: 35:01 (min:secs) | Online Version 1.1.0                         |  |

| <b>Symbol Digit Coding (SDC)</b>          | <b>Score</b> | <b>Standard</b> | <b>Percentile</b> |   |
|---|--------------|-----------------|-------------------|---|
| Correct Responses                         | 43           | 87              | 19                | The SDC test measures speed of processing and draw upon several cognitive processes simultaneously, such as visual scanning, visual perception, visual memory, and motor functions. Errors may be due to impulsive responding, misperception, or confusion.   |
| Errors*                                   | 0            | 110             | 75                |   |
| <b>Stroop Test (ST)</b>                   | <b>Score</b> | <b>Standard</b> | <b>Percentile</b> |   |
| Simple Reaction Time*                     | 569          | 58              | 1                 | The ST measures simple and complex reaction time, inhibition / disinhibition, mental flexibility or directed attention. The ST helps assess how well a subject is able to adapt to rapidly changing and increasingly complex set of directions. Prolonged reaction times indicate cognitive slowing / impairment. Errors may be due to impulsive responding, misperception, or confusion.   |
| Complex Reaction Time Correct*            | 649          | 94              | 34                |   |
| Stroop Reaction Time Correct*             | 798          | 92              | 30                |   |
| Stroop Commission Errors*                 | 0            | 110             | 75                |   |
| <b>Shifting Attention Test (SAT)</b>      | <b>Score</b> | <b>Standard</b> | <b>Percentile</b> |   |
| Correct Responses                         | 46           | 92              | 30                | The SAT measures executive function or how well a subject recognizes set shifting (mental flexibility) and abstraction (rules, categories) and manages multiple tasks simultaneously. Subjects have to adjust their responses to randomly changing rules. The best scores are high correct responses, few errors and a short reaction time. Normal subjects may be slow but accurate, or fast but not so accurate. Attention deficit may be apparent.   |
| Errors*                                   | 8            | 91              | 27                |   |
| Correct Reaction Time*                    | 978          | 114             | 82                |   |
| <b>Continuous Performance Test (CPT)</b>  | <b>Score</b> | <b>Standard</b> | <b>Percentile</b> |   |
| Correct Responses                         | 40           | 103             | 58                | The CPT measures sustained attention or vigilance and choice reaction time. Most normal subjects obtain near-perfect scores on this test. A long response time may suggest cognitive slowing and/or impairment. More than 2 errors (total) may be clinically significant. More than 4 errors (total) indicate attentional dysfunction.  |
| Omission Errors*                          | 0            | 103             | 58                |   |
| Commission Errors*                        | 0            | 107             | 68                |   |
| Choice Reaction Time Correct*             | 439          | 96              | 40                |   |
| <b>Perception Of Emotions Test (POET)</b> | <b>Score</b> | <b>Standard</b> | <b>Percentile</b> |   |
| Correct Responses                         | 11           | 95              | 37                | The POET measures how well a subject can perceive and identify specific emotions. The POET is an identification test of the positive emotions "happy" and "calm" and the negative emotions "angry" and "sad". "Social cognition" or "emotional acuity" has been defined as "the way in which people make sense of other people and themselves". It is the ability to perceive and understand social information. The reaction times in POET are much longer than in the other tests, indicating the complexity of central processes governing emotional acuity. |
| Average Correct Reaction Time*            | 1298         | 76              | 5                 |   |
| Omission Errors*                          | 1            | 95              | 37                |   |
| Commission Errors*                        | 0            | 122             | 93                |   |
| <b>Positive Emotions</b>                  |              |                 |                   |   |
| Correct Hits                              | 5            | 79              | 8                 |   |
| Reaction Time*                            | 1032         | 94              | 34                |   |
| <b>Negative Emotions</b>                  |              |                 |                   |   |
| Correct Hits                              | 6            | 111             | 77                |   |
| Reaction Time*                            | 1520         | 72              | 3                 |   |
| <b>Reasoning Test (RT)</b>                | <b>Score</b> | <b>Standard</b> | <b>Percentile</b> |   |
| Correct Responses                         | 9            | 100             | 50                | The NVRT measures how well a subject can perceive and understand the meaning of visual or abstract information and recognizing relationships between visual-abstract concepts. The NVRT is comprised of 15 matrices, or visual analogies. The matrices are progressively more difficult. Each is presented for 14.5 seconds. Non-verbal or visual-abstract reasoning is the process of perceiving issues and reaching conclusions through the use of symbols or generalizations rather than concrete factual information.                                       |
| Average Correct Reaction Time*            | 5847         | 89              | 23                |   |
| Commission Errors*                        | 5            | 99              | 47                |   |
| Omission Errors*                          | 1            | 102             | 55                |   |

## Auditory Digit Span Test

|                                   |   |
|-----------------------------------|---|
| Patient ID: Example, Example      | Test Date: December 27, 2017 09:03:06                         |
| Age: 58                           | Administrator: larry lyons                                    |
| Total Test Time: 62:41 (min:secs) | Language: English (United States)                             |
| Duration: 10:05 (min:secs)        | <a href="#">Administered using CNSVS Online Version 1.1.0</a> |

Auditory Digit Span Test has two parts. Part 1 requires the subject to listen to a series of numbers increasing one digit at a time, from 2 digits up to 10 digits, and when prompted repeat them in the same order as presented. Part 2 presents digit in the same manner as Part 1 but the patients repeat the digits back in the reverse order as presented. Difficulties in recalling the sequence may indicate issues of attention and/or working memory.

|                                   |                            |                            |
|-----------------------------------|----------------------------|----------------------------|
| <b>Auditory Digit Span Scores</b> | <b>Part 1 - Forward: 4</b> | <b>Part 2 - Reverse: 2</b> |
|-----------------------------------|----------------------------|----------------------------|

### Part 1 - Forward Order Digit Recall

| Level   | Set | Digits Displayed | Digits Entered | Digits Correct | Set Correct | Set RT |
|---------|-----|------------------|----------------|----------------|-------------|--------|
| 2       | 1   | 854              | 854            | 3              | Yes         | 3291   |
| 2       | 2   | 478              | 478            | 3              | Yes         | 2968   |
| 2       | 3   | 276              | 076            | 2              | No          | 5978   |
| 2       | 4   | 947              | 947            | 3              | Yes         | 4138   |
| 2       | 5   | 748              | 748            | 3              | Yes         | 3479   |
| 3       | 1   | 6248             | 6048           | 3              | No          | 4639   |
| 3       | 2   | 5487             | 5487           | 4              | Yes         | 3957   |
| 3       | 3   | 6492             | 6492           | 4              | Yes         | 4530   |
| 3       | 4   | 5324             | 5324           | 4              | Yes         | 4737   |
| 3       | 5   | 3279             | 3279           | 4              | Yes         | 4091   |
| 4       | 1   | 87926            | 87926          | 5              | Yes         | 4779   |
| 4       | 2   | 79845            | 79845          | 5              | Yes         | 4767   |
| 4       | 3   | 67483            | 67483          | 5              | Yes         | 4719   |
| 4       | 4   | 45289            | 45289          | 5              | Yes         | 4413   |
| 5       | 1   | 946532           | 945642         | 3              | No          | 9535   |
| 5       | 2   | 648239           | BB             | 0              | No          | 26260  |
| 5       | 3   | 362845           | 362845         | 6              | Yes         | 5770   |
| 5       | 4   | 825346           | 825346         | 6              | Yes         | 7238   |
| 5       | 5   | 735946           | 735946         | 6              | Yes         | 5670   |
| 5       | 6   | 384956           | 374956         | 5              | No          | 6081   |
| Totals: |     |                  |                | 79             | 15          | 121040 |

### Part 2 - Reverse Order Digit Recall

| Level   | Set | Digits Displayed | Digits Entered | Digits Correct | Set Correct | Set RT |
|---------|-----|------------------|----------------|----------------|-------------|--------|
| 1       | 1   | 32               | 03             | 1              | No          | 3520   |
| 1       | 2   | 95               | 59             | 2              | Yes         | 3735   |
| 1       | 3   | 35               | 53             | 2              | Yes         | 3384   |
| 1       | 4   | 94               | 49             | 2              | Yes         | 3314   |
| 1       | 5   | 69               | 96             | 2              | Yes         | 3454   |
| 2       | 1   | 842              | 248            | 3              | Yes         | 7733   |
| 2       | 2   | 963              | 369            | 3              | Yes         | 4561   |
| 2       | 3   | 834              | 438            | 3              | Yes         | 3697   |
| 2       | 4   | 736              | 637            | 3              | Yes         | 6350   |
| 3       | 1   | 6452             | 2564           | 2              | No          | 7728   |
| 3       | 2   | 6592             | 2956           | 4              | Yes         | 5889   |
| 3       | 3   | 3796             | 6973           | 4              | Yes         | 6860   |
| 3       | 4   | 7539             | 9759           | 2              | No          | 9138   |
| 3       | 5   | 2896             | 698            | 3              | No          | 9642   |
| Totals: |     |                  |                | 36             | 10          | 79005  |

## Medical Outcomes Survey (MOS) SF-36

|                                   |   |
|-----------------------------------|---|
| Patient ID: Example, Example      | Test Date: December 27, 2017 09:03:06                         |
| Age: 58                           | Administrator: larry lyons                                    |
| Total Test Time: 62:41 (min:secs) | Language: English (United States)                             |
| Duration: 5:44 (min:secs)         | <a href="#">Administered using CNSVS Online Version 1.1.0</a> |

| Domain                     | Score | Standard | Percentile |   |
|----------------------------|-------|----------|------------|---|
| Physical Functioning       | 20    | 72       | 3          | As part of the Medical Outcomes Survey (MOS) - a multi-year, multi-site study to explain variations in patient outcomes - RAND (www.rand.org) developed the 36-Item Medical Outcomes Survey (SF-36). SF-36 is a set of generic, coherent, and easily administered quality-of-life measures. These measures rely upon patient self-reporting and are now widely utilized by managed care organizations and by Medicare for routine monitoring and assessment of care outcomes in adult patients. |
| Role Functioning/Physical  | 25    | 90       | 25         |   |
| Role Functioning/Emotional | 0     | 76       | 5          |   |
| Energy/Fatigue             | 15    | 75       | 5          |   |
| Emotional Wellbeing        | 40    | 79       | 8          |   |
| Social Functioning         | 25    | 68       | 2          |   |
| Pain                       | 23    | 72       | 3          |   |
| General Health             | 10    | 67       | 1          |   |
| Health Change              | 0     | 62       | 1          |   |

### Medical Outcomes Short Form Health Survey (SF-36) Questions

|   |  |                                      |
|---|--|--------------------------------------|
| 1 | In general, would you say your health is:                                | 4 - Fair                             |
| 2 | Compared to one year ago, how would you rate your health in general now? | 5 - Much worse now than one year ago |

The following items are about activities you might do during a typical day. Does your health now limit you in these activities? If so, how much?

|    |  |                           |
|----|--|---------------------------|
| 3  | Vigorous activities, such as running, lifting heavy objects, participating in strenuous sports | 1 - Yes, limited a lot    |
| 4  | Moderate activities, such as moving a table, pushing a vacuum cleaner, bowling or playing golf | 1 - Yes, limited a lot    |
| 5  | Lifting or carrying groceries  | 1 - Yes, limited a lot    |
| 6  | Climbing several flights of stairs   | 1 - Yes, limited a lot    |
| 7  | Climbing one flight of stairs  | 1 - Yes, limited a lot    |
| 8  | Bending, kneeling, or stooping   | 1 - Yes, limited a lot    |
| 9  | Walking more than a mile   | 2 - Yes, limited a little |
| 10 | Walking several blocks   | 2 - Yes, limited a little |
| 11 | Walking one block  | 2 - Yes, limited a little |
| 12 | Bathing or dressing yourself   | 2 - Yes, limited a little |

During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of your physical health?

|    |  |         |
|----|--|---------|
| 13 | Cut down on the amount of time you spent on work or other activities                       | 2 - No  |
| 14 | Accomplished less than you would like  | 1 - Yes |
| 15 | Were limited in the kind of work or other activities                                       | 1 - Yes |
| 16 | Had difficulty performing the work or other activities (for example, it took extra effort) | 1 - Yes |

During the past 4 weeks, have you had any of the following problems with your work or other regular daily activities as a result of any emotional problems (such as feeling depressed or anxious)?

|    |  |         |
|----|--|---------|
| 17 | Cut down on the amount of time you spent on work or other activities | 1 - Yes |
| 18 | Accomplished less than you would like                                | 1 - Yes |
| 19 | Didn't do work or other activities as carefully as usual             | 1 - Yes |

During the past 4 weeks, to what extent has your physical health or emotional problems interfered with ...

|    |   |                 |
|----|---|-----------------|
| 20 | Your normal social activities with family, friends, neighbors, or groups? | 4 - Quite a bit |
|----|---|-----------------|

During the past 4 weeks ...

|    |   |                 |
|----|---|-----------------|
| 21 | How much bodily pain have you had?  | 5 - Severe      |
| 22 | How much did pain interfere with your normal work (including both work outside the home and housework)? | 4 - Quite a bit |

## Medical Outcomes Survey (MOS) SF-36

|                                   |   |
|-----------------------------------|---|
| Patient ID: Example, Example      | Test Date: December 27, 2017 09:03:06                         |
| Age: 58                           | Administrator: larry lyons                                    |
| Total Test Time: 62:41 (min:secs) | Language: English (United States)                             |
| Duration: 0:05 (min:secs)         | <a href="#">Administered using CNSVS Online Version 1.1.0</a> |

These questions are about how you feel and how things have been with you during the past 4 weeks. For each question, please give the one answer that comes closest to the way you have been feeling. How much of the time during the past 4 weeks ...

|    |   |                            |
|----|---|----------------------------|
| 23 | Did you feel full of pep?   | 5 - A little of the time   |
| 24 | Have you been a very nervous person?                                | 2 - Most of the time       |
| 25 | Have you felt so down in the dumps that nothing could cheer you up? | 4 - Some of the time       |
| 26 | Have you felt calm and peaceful?                                    | 4 - Some of the time       |
| 27 | Did you have a lot of energy?                                       | 5 - A little of the time   |
| 28 | Have you felt downhearted and blue?                                 | 3 - A good bit of the time |
| 29 | Did you feel worn out?  | 2 - Most of the time       |
| 30 | Have you been a happy person?                                       | 4 - Some of the time       |
| 31 | Did you feel tired?   | 1 - All of the time        |

During the past 4 weeks, how much of the time has your physical health or emotional problems interfered with ...

|    |   |                      |
|----|---|----------------------|
| 32 | Your social activities (like visiting with friends, relatives, etc.)? | 2 - Most of the time |
|----|---|----------------------|

How TRUE or FALSE is the following statement for you.

|    |  |                      |
|----|--|----------------------|
| 33 | I seem to get sick a little easier than other people | 2 - Mostly true      |
| 34 | I am as healthy as anybody I know                    | 5 - Definitely false |
| 35 | I expect my health to get worse                      | 1 - Definitely true  |
| 36 | My health is excellent                               | 5 - Definitely false |

## NeuroPsych Questionnaire (NPQ) SF-45

|                                   |   |
|-----------------------------------|---|
| Patient ID: Example, Example      | Test Date: December 27, 2017 09:03:06                         |
| Age: 58                           | Administrator: larry lyons                                    |
| Total Test Time: 62:41 (min:secs) | Language: English (United States)                             |
| Duration: 4:45 (min:secs)         | <a href="#">Administered using CNSVS Online Version 1.1.0</a> |

| Domain         | Score | Severity      | Description  |
|----------------|-------|---------------|--|
| Attention      | 100   | Mild          | <p>The Neuropsych Questionnaire Short Form asks patients (or an appropriate observer) a series of questions about their clinical state. The questions are about the symptoms of various neuropsychiatric disorders. The terminology is similar to that used in the diagnostic manuals, and in many familiar clinical questionnaires and rating scales; but it has been simplified, and all symptoms are scored on the same metric. Scores are reported on a scale of 0 (not a problem) to 300 (severe). As a rule, scores above 225 indicate a severe problem; scores from 150-224 indicate a moderate problem; and scores from 75-149, a mild problem. A high score on the Neuropsych Questionnaire Short Form means that the patient is reporting more symptoms of greater intensity. It doesn't necessarily mean that the patient has a particular condition; just that he or she (or their spouse, parent or caregiver) is saying that they have a lot of intense symptoms. Conversely, a low score simply means that the patient (or caregiver) is not reporting symptoms associated with a particular condition, at least during the period of time specified. It does not mean that the patient does not have the condition. Just as some people over-state their problems, others tend to under-state their problems. The Neuropsych Questionnaire Short Form is not a diagnostic instrument. The results it generates are only meant to be interpreted by an experienced clinician in the course of a clinical examination.</p> |
| Impulsive      | 240   | Severe        |  |
| Memory         | 100   | Mild          |  |
| Anxiety        | 267   | Severe        |  |
| Panic          | 200   | Moderate      |  |
| Depression     | 260   | Severe        |  |
| Mood Stability | 225   | Severe        |  |
| Aggression     | 100   | Mild          |  |
| Fatigue        | 300   | Severe        |  |
| Sleep          | 300   | Severe        |  |
| Suicide        | 0     | Not a problem |  |
| Pain           | 275   | Severe        |  |

| Attention Questions      |  |                        |
|--------------------------|--|------------------------|
| 1                        | Difficulty concentrating                                     | 1 - A mild problem     |
| 2                        | Easily distracted  | 1 - A mild problem     |
| 3                        | Feeling scattered, disorganized                              | 1 - A mild problem     |
| 4                        | Forgetful, I need constant reminding                         | 1 - A mild problem     |
| 5                        | Short attention span   | 1 - A mild problem     |
| Impulsive Questions      |  |                        |
| 1                        | Feeling restless   | 3 - A severe problem   |
| 2                        | Fidgety, I can't sit still                                   | 2 - A moderate problem |
| 3                        | Impatient  | 3 - A severe problem   |
| 4                        | Impulsive, act without thinking                              | 1 - A mild problem     |
| 5                        | Overly active  | 3 - A severe problem   |
| Memory Questions         |  |                        |
| 1                        | Forgetful, I need constant reminding                         | 1 - A mild problem     |
| 2                        | My mind goes blank   | 1 - A mild problem     |
| 3                        | Problems with memory   | 1 - A mild problem     |
| 4                        | Putting something down and then forgetting where you put it. | 1 - A mild problem     |
| Anxiety Questions        |  |                        |
| 1                        | Feeling anxious  | 3 - A severe problem   |
| 2                        | Feeling nervous  | 2 - A moderate problem |
| 3                        | Feeling restless   | 3 - A severe problem   |
| 4                        | Feeling tense  | 3 - A severe problem   |
| 5                        | Fidgety, I can't sit still                                   | 2 - A moderate problem |
| 6                        | Worrying too much  | 3 - A severe problem   |
| Panic Questions          |  |                        |
| 1                        | Attacks of intense anxiety                                   | 3 - A severe problem   |
| 2                        | Feeling so nervous it's hard to breathe                      | 1 - A mild problem     |
| 3                        | Panic attacks  | 2 - A moderate problem |
| Depression Questions     |  |                        |
| 1                        | Feeling depressed  | 2 - A moderate problem |
| 2                        | Feeling discouraged about the future                         | 3 - A severe problem   |
| 3                        | Feeling irritable  | 3 - A severe problem   |
| 4                        | Feeling little or no interest in things                      | 2 - A moderate problem |
| 5                        | Not enjoying things as much as before                        | 3 - A severe problem   |
| Mood Stability Questions |  |                        |
| 1                        | Anger  | 1 - A mild problem     |
| 2                        | Easily frustrated  | 3 - A severe problem   |
| 3                        | Feeling irritable  | 3 - A severe problem   |
| 4                        | My moods change quickly                                      | 2 - A moderate problem |

## NeuroPsych Questionnaire (NPQ) SF-45

|                                   |   |
|-----------------------------------|---|
| Patient ID: Example, Example      | Test Date: December 27, 2017 09:03:06                         |
| Age: 58                           | Administrator: larry lyons                                    |
| Total Test Time: 62:41 (min:secs) | Language: English (United States)                             |
| Duration: 0:04 (min:secs)         | <a href="#">Administered using CNSVS Online Version 1.1.0</a> |

### Aggression Questions

|   |                                   |                        |
|---|-----------------------------------|------------------------|
| 1 | Defiant or argumentative          | 2 - A moderate problem |
| 2 | Destructive to property or things | 0 - Not a problem      |
| 3 | Hostile                           | 1 - A mild problem     |
| 4 | Physical aggression toward others | 1 - A mild problem     |

### Fatigue Questions

|   |              |                      |
|---|--------------|----------------------|
| 1 | Fatigue      | 3 - A severe problem |
| 2 | Feeling weak | 3 - A severe problem |
| 3 | Low energy   | 3 - A severe problem |

### Sleep Questions

|   |                             |                      |
|---|-----------------------------|----------------------|
| 1 | Hard to fall asleep         | 3 - A severe problem |
| 2 | Restless or disturbed sleep | 3 - A severe problem |

### Suicide Questions

|   |  |                   |
|---|--|-------------------|
| 1 | I feel like I would be better off dead                   | 0 - Not a problem |
| 2 | I feel that my family would be better off if I were gone | 0 - Not a problem |
| 3 | Thoughts about ending your life                          | 0 - Not a problem |

### Pain Questions

|   |                          |                        |
|---|--------------------------|------------------------|
| 1 | A lot of aches and pains | 3 - A severe problem   |
| 2 | Back pain                | 3 - A severe problem   |
| 3 | Headache                 | 2 - A moderate problem |
| 4 | Muscle soreness          | 3 - A severe problem   |



## Memory Questionnaire (MEMQ) SF-27

|                                   |   |
|-----------------------------------|---|
| Patient ID: Example, Example      | Test Date: December 27, 2017 09:03:06                         |
| Age: 58                           | Administrator: larry lyons                                    |
| Total Test Time: 62:41 (min:secs) | Language: English (United States)                             |
| Duration: 3:52 (min:secs)         | <a href="#">Administered using CNSVS Online Version 1.1.0</a> |

The Memory Questionnaire asks patients (or an appropriate observer) a series of questions about memory or concentration difficulties. MEMQ Mean Score is reported on a scale of 0 (not a problem) to 300 (severe). As a rule, scores above 225 indicate a severe problem; scores from 150-224 indicate a moderate problem; and scores from 75-149, a mild problem. A high score means that the patient is reporting more symptoms of greater intensity. It doesn't necessarily mean that the patient has a particular condition; just that he or she (or their spouse, parent or caregiver) is saying that they have a lot of intense symptoms. Conversely, a low score simply means that the patient (or caregiver) is not reporting symptoms associated with a particular condition, at least during the period of time specified. It does not mean that the patient does not have the condition. Just as some people over-state their problems, others tend to under-state their problems. The Memory Questionnaire is not a diagnostic instrument. The results it generates are only meant to be interpreted by an experienced clinician in the course of a clinical examination.

|    |  |                                  |
|----|--|----------------------------------|
| 1  | Forgetting where you have put something. Losing things around the house.   | 1 - Some of the time             |
| 2  | Failing to recognize places that you have been before.   | 0 - None or a little of the time |
| 3  | Finding a television story difficult to follow.  | 0 - None or a little of the time |
| 4  | Not remembering a change in your daily routine, such as a change in the place where something is kept, or a change in the time something happens. Following your old routine by mistake. | 0 - None or a little of the time |
| 5  | Having to go back to check whether you have done something that you meant to do.   | 1 - Some of the time             |
| 6  | Forgetting when it was that something happened.  | 1 - Some of the time             |
| 7  | Completely forgetting to take things with you, or leaving things behind and having to go back and fetch them.  | 1 - Some of the time             |
| 8  | Forgetting that you were told something yesterday or a few days ago, and having to be reminded about it.   | 1 - Some of the time             |
| 9  | Starting to read something (book, newspaper, magazine) without realizing you have already read it before.  | 0 - None or a little of the time |
| 10 | Letting yourself ramble on about unimportant or irrelevant things.   | 1 - Some of the time             |
| 11 | Failing to recognize by sight close relatives or friends that you meet frequently.   | 0 - None or a little of the time |
| 12 | Having difficulty picking up anew skill. For example, finding it hard to learn a new game or to work a new gadget after you have practiced it once or twice.                             | 0 - None or a little of the time |
| 13 | Finding that a word is "on the tip of your tongue." You know what it is but you cannot quite find it.  | 1 - Some of the time             |
| 14 | Completely forgetting to do things you said you would do, or things you planned to do.   | 1 - Some of the time             |
| 15 | Forgetting important details of what you did or what happened to you the day before.   | 0 - None or a little of the time |
| 16 | When talking to someone, forgetting what you have just said. Maybe saying "What was I talking about?"  | 1 - Some of the time             |
| 17 | When reading a newspaper or magazine, being unable to follow the thread of a story, losing track of what it is about.  | 0 - None or a little of the time |
| 18 | Forgetting to tell somebody something. Perhaps forgetting to pass on a message or to remind someone of something.  | 1 - Some of the time             |
| 19 | Forgetting important details about yourself like your birthday or where you live.  | 0 - None or a little of the time |
| 20 | Getting the details of what someone has told you mixed up and confused.  | 1 - Some of the time             |
| 21 | Telling someone a story or joke that you have told them already.   | 0 - None or a little of the time |
| 22 | Forgetting details of things you do regularly, whether at home or work, for example, forgetting details of what to do or what time it is.  | 0 - None or a little of the time |
| 23 | Finding that the faces of famous people seen on TV or in photographs look unfamiliar.  | 1 - Some of the time             |
| 24 | Forgetting where things are normally kept, or looking for them in the wrong place.   | 1 - Some of the time             |
| 25 | Getting lost or turning in the wrong direction on a journey, on a walk, or in a building where you have been before.   | 1 - Some of the time             |
| 26 | Repeating to someone what you have just told them or asking them the same question twice.  | 0 - None or a little of the time |
| 27 | Doing some routine thing twice by mistake. For example, putting two bags of tea in the teapot, or going to brush/comb your hair when you have just done so.                              | 0 - None or a little of the time |

|                    |           |                        |                           |
|--------------------|-----------|------------------------|---------------------------|
| <b>Total Score</b> | <b>14</b> | <b>MEMQ Mean Score</b> | <b>52 (Not a problem)</b> |
|--------------------|-----------|------------------------|---------------------------|



## PTSD Checklist - Civilian Version (PCL-C) SF-17

|                                   |   |
|-----------------------------------|---|
| Patient ID: Example, Example      | Test Date: December 27, 2017 09:03:06                         |
| Age: 58                           | Administrator: larry lyons                                    |
| Total Test Time: 62:41 (min:secs) | Language: English (United States)                             |
| Duration: 3:02 (min:secs)         | <a href="#">Administered using CNSVS Online Version 1.1.0</a> |

The PCL is a 17-item self-report measure of the 17 DSM-IV symptoms of PTSD. Respondents rate how much they were "bothered by that problem in the past month". Items are rated on a 5-point scale ranging from 1 ("not at all") to 5 ("extremely"). There are several versions of the PCL. The original PCL is the PCL-M (military). The PCL-M asks about problems in response to "stressful military experiences." The PCL-S (specific) asks about problems in relation to an identified "stressful experience." The PCL-C (civilian) is for civilians and is not focused on any one traumatic events. Instead it asks more generally about problems in relation to stressful experiences. A total score (range 17-85) is obtained by summing the scores from each of the 17 items. A second way to score the PCL-C is to follow the DSM-IV criteria.

|                          |   |                  |
|--------------------------|---|------------------|
| 1                        | Repeated, disturbing memories, thoughts, or images of a stressful experience from the past?   | 4 - Quite a bit  |
| 2                        | Repeated, disturbing dreams of a stressful experience from the past?  | 2 - A little bit |
| 3                        | Suddenly acting or feeling as if a stressful experience were happening again (as if you were reliving it)?  | 2 - A little bit |
| 4                        | Feeling very upset when something reminded you of a stressful experience from the past?   | 2 - A little bit |
| 5                        | Having physical reactions (e.g., heart pounding, trouble breathing, or sweating) when something reminded you of a stressful experience from the past? | 2 - A little bit |
| 6                        | Avoid thinking about or talking about a stressful experience from the past or avoid having feelings related to it?                                    | 3 - Moderately   |
| 7                        | Avoid activities or situations because they remind you of a stressful experience from the past?   | 4 - Quite a bit  |
| 8                        | Trouble remembering important parts of a stressful experience from the past?  | 1 - Not at all   |
| 9                        | Loss of interest in things that you used to enjoy?  | 5 - Extremely    |
| 10                       | Feeling distant or cut off from other people?   | 4 - Quite a bit  |
| 11                       | Feeling emotionally numb or being unable to have loving feelings for those close to you?  | 2 - A little bit |
| 12                       | Feeling as if your future will somehow be cut short?  | 5 - Extremely    |
| 13                       | Trouble falling or staying asleep?  | 4 - Quite a bit  |
| 14                       | Feeling irritable or having angry outbursts?  | 3 - Moderately   |
| 15                       | Having difficulty concentrating?  | 2 - A little bit |
| 16                       | Being "super alert" or watchful on guard?   | 4 - Quite a bit  |
| 17                       | Feeling jumpy or easily startled?   | 2 - A little bit |
| <b>PCL-C Total Score</b> |   | <b>51</b>        |

**PCL-C for DSM-IV (11/1/94) Weathers, Litz, Huska, & Keane National Center for PTSD - Behavioral Science Division**

**The PCL-C is a Government document in the public domain.**