**HOMECog – Patient Reported Items – Batch 1**

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|  | **Item** | **Responses** | **Neuropsych Domain** |
| 1 | ***How often*** do you become easily confused? | Very often, Often, Sometimes, Rarely, Never | Attention |
| 2 | ***How often*** do you have brain fog? | Very often, Often, Sometimes, Rarely, Never | Attention |
| 3 | ***How often*** do you need help from others to stay on track? | Very often, Often, Sometimes, Rarely, Never | Attention |
| 4 | ***How often*** are you not aware of what is going on around you? | Very often, Often, Sometimes, Rarely, Never | Attention |
| 5 | ***How often*** do you have trouble staying alert when you need to? | Very often, Often, Sometimes, Rarely, Never | Attention |
| 6 | ***How often*** does it take you a long time to think of what you want to say? | Very often, Often, Sometimes, Rarely, Never | Attention |
| 7 | ***How often*** do you have difficulty focusing during the day? | Very often, Often, Sometimes, Rarely, Never | Attention |
| 8 | ***How much difficulty*** do you have thinking clearly? | Unable, A lot, Some, A little, None | Attention |
| 9 | ***How much difficulty*** do you have doing math in your head? | Unable, A lot, Some, A little, None | Attention |
| 10 | ***How much difficulty*** do you have paying attention when there are distractions? | Unable, A lot, Some, A little, None | Attention |
| 11 | ***How much difficulty*** do you have concentrating when you need to? | Unable, A lot, Some, A little, None | Attention |
| 12 | ***How often*** do you forget what you intended to do? | Very often, Often, Sometimes, Rarely, Never | Attention |
| 13 | ***How much difficulty*** do you have remembering simple directions without writing them down? | Unable, A lot, Some, A little, None | Attention |
| 14 | ***How often*** do you make simple mistakes? | Very often, Often, Sometimes, Rarely, Never | Attention |
| 15 | ***How often*** do others have to remind you to take your medicine? | Very often, Often, Sometimes, Rarely, Never | Executive |
| 16 | ***How often*** do others help you with things you used to do by yourself (because of your memory)? | Very often, Often, Sometimes, Rarely, Never | Executive |
| 17 | ***How often*** do people close to you worry about your forgetfulness? | Very often, Often, Sometimes, Rarely, Never | Executive |
| 18 | ***How often*** do others go with you to appointments due to problems with your thinking? | Very often, Often, Sometimes, Rarely, Never | Executive |
| 19 | ***How often*** do you avoid doing activities that take a lot of thinking and concentration? | Very often, Often, Sometimes, Rarely, Never | Executive |
| 20 | ***How often*** do you act too friendly with strangers? | Very often, Often, Sometimes, Rarely, Never | Executive |
| 21 | ***How often*** do you need help from others to plan a meal? | Very often, Often, Sometimes, Rarely, Never | Executive |
| 22 | ***How often*** do you need help from others to plan your meals for the week? | Very often, Often, Sometimes, Rarely, Never | Executive |
| 23 | ***How often*** do you get confused in unfamiliar places? | Very often, Often, Sometimes, Rarely, Never | Executive |
| 24 | ***How often*** do you have difficulty returning to a task after being interrupted? | Very often, Often, Sometimes, Rarely, Never | Executive |
| 25 | ***How often*** do you depend on others to keep your life in order? | Very often, Often, Sometimes, Rarely, Never | Executive |
| 26 | ***How often*** are others worried about your memory, even though you are not? | Very often, Often, Sometimes, Rarely, Never | Executive |
| 27 | ***How often*** do you worry about your memory problems? | Very often, Often, Sometimes, Rarely, Never | Executive |
| 28 | ***How often*** do you say things that might offend another person? | Very often, Often, Sometimes, Rarely, Never | Executive |
| 29 | ***How often*** do you say things without thinking? | Very often, Often, Sometimes, Rarely, Never | Executive |
| 30 | ***How much difficulty*** do you have describing how you feel (for example, where it hurts, what is wrong)? | Unable, A lot, Some, A little, None | Executive |
| 31 | ***How much difficulty*** do you have thinking through things before acting? | Unable, A lot, Some, A little, None | Executive |
| 32 | ***How much difficulty*** do you have keeping your living space organized? | Unable, A lot, Some, A little, None | Executive |
| 33 | ***How much difficulty*** do you have preparing for daily activities like washing or grooming? | Unable, A lot, Some, A little, None | Executive |
| 34 | ***How much difficulty*** do you have keeping track of what you are doing if there are distractions around you? | Unable, A lot, Some, A little, None | Executive |
| 35 | ***How much difficulty*** do you have completing simple household tasks like making a cup of coffee? | Unable, A lot, Some, A little, None | Executive |
| 36 | ***How much difficulty*** do you have making decisions about your day, such as what to have for lunch? | Unable, A lot, Some, A little, None | Executive |
| 37 | ***How much difficulty*** do you have returning to a task after being interrupted? | Unable, A lot, Some, A little, None | Executive |
| 38 | ***How much difficulty*** do you have making everyday decisions, such as what clothes to wear? | Unable, A lot, Some, A little, None | Executive |
| 39 | ***How much difficulty*** do you have planning out the steps of a familiar task? | Unable, A lot, Some, A little, None | Executive |
| 40 | ***How much difficulty*** do you have organizing your day? | Unable, A lot, Some, A little, None | Executive |
| 41 | ***How much difficulty*** do you have picking up on a task where you left off? | Unable, A lot, Some, A little, None | Executive |
| 42 | ***How much difficulty*** do you have controlling your anger when you are frustrated? | Unable, A lot, Some, A little, None | Executive |
| 43 | ***How much difficulty*** do you have keeping track of what your medicines are for? | Unable, A lot, Some, A little, None | Executive |
| 44 | ***How often*** do you need help from others to stay organized? | Very often, Often, Sometimes, Rarely, Never | Executive |
| 45 | ***How often*** do you have trouble saying what you mean to others (saying yes when you mean no?) | Very often, Often, Sometimes, Rarely, Never | Language |
| 46 | ***How much difficulty*** do you have following instructions to take a new medicine? | Unable, A lot, Some, A little, None | Language |
| 47 | ***How much difficulty*** do you have describing your health problems? | Unable, A lot, Some, A little, None | Language |
| 48 | ***How much difficulty*** do you have understanding instructions from your health care provider about your care plan? | Unable, A lot, Some, A little, None | Language |
| 49 | ***How much difficulty*** do you have carrying on a conversation with family and friends? | Unable, A lot, Some, A little, None | Language |
| 50 | ***How much difficulty*** do you have giving step-by-step instructions to someone else? | Unable, A lot, Some, A little, None | Language |
| 51 | ***How much difficulty*** do you have keeping instructions straight without needing them repeated? | Unable, A lot, Some, A little, None | Language |
| 52 | ***How often*** do you forget the name of an object you use frequently (e.g., phone, toothbrush)? | Very often, Often, Sometimes, Rarely, Never | Language |
| 53 | ***How often*** do you forget the meaning of common words? | Very often, Often, Sometimes, Rarely, Never | Language |
| 54 | ***How much difficulty*** do you have understanding instructions when someone tells them to you? | Unable, A lot, Some, A little, None | Language |
| 55 | ***How much difficulty*** do you have understanding what someone says the first time you hear it? | Unable, A lot, Some, A little, None | Language |
| 56 | ***How much difficulty*** do you have finding the right words to say when talking to someone? | Unable, A lot, Some, A little, None | Language |
| 57 | ***How much difficulty*** do you have remembering what happened during the day? | Unable, A lot, Some, A little, None | Memory |
| 58 | ***How often*** do you forget to take your medication if you are not reminded? | Very often, Often, Sometimes, Rarely, Never | Memory |
| 59 | ***How often*** do you make mistakes when taking your medications? | Very often, Often, Sometimes, Rarely, Never | Memory |
| 60 | ***How often*** do you forget to take medications at the right time? | Very often, Often, Sometimes, Rarely, Never | Memory |
| 61 | ***How often*** do you need other people to respond to your doctor's questions? | Very often, Often, Sometimes, Rarely, Never | Memory |
| 62 | ***How often*** do you forget things that have happened recently? | Very often, Often, Sometimes, Rarely, Never | Memory |
| 63 | ***How often*** do you ask family members the same question repeatedly? | Very often, Often, Sometimes, Rarely, Never | Memory |
| 64 | ***How often*** do you forget the year? | Very often, Often, Sometimes, Rarely, Never | Memory |
| 65 | ***How often*** do you repeat yourself several times because you forget you have told someone something? | Very often, Often, Sometimes, Rarely, Never | Memory |
| 66 | ***How often*** do you have difficulty remembering where you put things (for example, your keys)? | Very often, Often, Sometimes, Rarely, Never | Memory |
| 67 | ***How often*** do you forget upcoming appointments? | Very often, Often, Sometimes, Rarely, Never | Memory |
| 68 | ***How often*** do you have difficulty adjusting to changes in your medical treatment plan? | Very often, Often, Sometimes, Rarely, Never | Memory |
| 69 | ***How much difficulty*** do you have remembering the names of close family and friends? | Unable, A lot, Some, A little, None | Memory |
| 70 | ***How much difficulty*** do you have explaining why you are in the hospital? | Unable, A lot, Some, A little, None | Memory |
| 71 | ***How much difficulty*** do you have answering questions about yourself such as your name, age, and where you are? | Unable, A lot, Some, A little, None | Memory |
| 72 | ***How much difficulty*** do you have remembering what you need to do each day? | Unable, A lot, Some, A little, None | Memory |
| 73 | ***How much difficulty*** do you have remembering a few shopping items without a list? | Unable, A lot, Some, A little, None | Memory |
| 74 | ***How often*** do you get lost in your neighborhood? | Very often, Often, Sometimes, Rarely, Never | Memory |
| 75 | ***How often*** do you not trust your memory? | Very often, Often, Sometimes, Rarely, Never | Memory |