

ICPSR 4248

ACTIVE (Advanced Cognitive Training for Independent and Vital Elderly), 1999-2001 [United States]

Sharon Tennstedt
New England Research Institutes

John Morris
Hebrew Senior Life-Boston

Frederick Unverzagt
Indiana University

George Rebok
Johns Hopkins University

Sherry Willis
Pennsylvania State University

Karlene Ball
University of Alabama-Birmingham

Michael Marsiske
University of Florida

Form 717 Take-Home EPT Codebook

Inter-university Consortium for
Political and Social Research
P.O. Box 1248
Ann Arbor, Michigan 48106
www.icpsr.umich.edu

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ABBREVIATED BATTERY EPT Take-Home Test

ANNUAL POST-TEST

FORM #717

3rd-5th

A1. Study ID#:

Label

A2. Visit #: ABB3, ABB4, ABB5, ABB6 (circle one)

VISIT	Frequency	Percent	Cum Freq	Cum Percent
ABB3	180	45.23	180	45.23
ABB5	218	54.77	398	100.00

A3. Form Version: 06/01/2001

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INSTRUCTIONS FOR EVERYDAY PROBLEMS TEST

The purpose of this test is to examine how well you can read and understand the kinds of material that many older adults see in everyday activities. These materials include such things as medicine labels, phone bills, and mail order forms.

At the top of each page there will be material, such as a label or chart. Below there will be 2 questions about the material. You are to write answers to the questions. First, look over the questions to get an idea of the kind of information that you should be looking for. Then read the selection and write the answer on the lines below.

You do not need to write complete sentences to answer the questions. You may answer the question in a few words. Please attempt to answer every question. There is no penalty for guessing.

Do not spend too much time on any one question. There are 28 questions in the test.

Turn the page and we will go over two example questions.

You should answer these questions without help from another person. If you have difficulty writing, another person can write your answers on the form.

A9. PLEASE RECORD THE TIME YOU START THE TEST HERE:

_____ : _____ AM / PM

At the top of the page is a recipe for Sour Milk Biscuits. Read Question A "Which ingredient is mixed with the sour milk?" Find the answer to the question in the recipe.

SOUR MILK BISCUITS

2 cups flour	2 tablespoons shortening
3 teaspoons baking powder	1/2 teaspoons soda
1 teaspoon salt	3/4 cup sour milk

Sift flour, baking powder, and salt together. Rub in shortening with finger tips. Mix soda and sour milk. Add slowly to first mixture and mix to a soft dough. Roll out on slightly floured board to 1/2 inch thickness. Cut with a biscuit cutter. Bake in quick oven (450 degrees F) 10 to 15 minutes.

Yield: 12 biscuits

- A. Which ingredient is mixed with the sour milk?

Soda

The correct answer is "soda". Therefore, the word "soda" was written on the line below the question.

Now look at Question B. Find the answer in the recipe. Write the answer on the line below Question B.

- B. If you wanted to make just 6 biscuits, how much flour would you use?

The correct answer is "1 cup". Six biscuits would require only **half** the amount in the recipe given. You should have written "1 cup" on the line.

First look over the 2 questions on a page. Find the answer in the material at the top of the page. Write the answer on the lines below each question. You do not need to write a complete sentence to answer the question.

FURNITURE POLISHING PRODUCTS		
Product	Application	Results
Liquid polish	Apply with a soft cloth; buff lightly with a clean, soft cloth while wet	High luster; little protection
Paste wax	Apply sparingly with a soft cloth; buff vigorously with a clean, soft cloth when dry	High luster; moderate protection; slight yellowing
Spray wax	Spray on; buff with a clean, soft cloth while wet	Moderate luster; little protection
Dusting spray	Spray on; wipe off with a clean, soft cloth	Prevents dust from scattering; no protection
Scratch-cover liquid polish	Apply with a soft cloth; wipe off with a clean, soft cloth	Conceals blemishes; no protection
Oil finish	Apply with a soft cloth; dry with a clean, soft cloth	High luster; no protection

1. What product should you use to hide imperfections in the finish?

☐

HIDE	Frequency	Percent	Cum Freq	Cum Percent
0	60	15.08	60	15.08
1	335	84.17	395	99.25
2	3	0.75	398	100.00

2. What product should you use if you want the most protection available for your furniture?

☐

MPROT	Frequency	Percent	Cum Freq	Cum Percent
0	37	9.30	37	9.30
1	354	88.94	391	98.24
2	7	1.76	398	100.00

Charts: Itemized Long Distance Telephone Bill

October 4, 1998

This portion of your bill is provided as a service to PIC. You may choose another company for your long distance telephone calls while still receiving your local telephone service from Bell of Concord.

No.	Date	Time	Call Type	Place	Number	Minutes	Cost
1	Aug 29	7:28 PM	Evening	To CLEVELAND OH	216-555-1111	46	7.08
2	Aug 29	8:46 PM	Evening	To COLUMBUS OH	614-777-5555	1	.15
3	Aug 29	8:51 PM	Evening	To CLEVELAND OH	216-456-7890	1	.15
4	Aug 29	9:18 PM	Evening	To CLEVELAND OH	216-555-1111	1	.15
5	Sep 10	7:11 PM	Evening	To CLEVELAND OH	216-888-2222	44	6.78
6	Sep 17	9:14 PM	Evening	To CLEVELAND OH	216-999-9999	33	5.08
7	Sep 22	7:10 PM	Evening	To CLEVELAND OH	216-555-1111	1	.15
8	Sep 22	8:35 PM	Evening	To READING PA	215-777-5555	23	4.42
9	Oct 1	8:33 PM	Evening	To CLEVELAND OH	216-999-9999	23	3.69

3. To what phone number was the greatest number of calls made?

GNCALLS	Frequency	Percent	Cum Freq	Cum Percent
0	60	15.08	60	15.08
1	336	84.42	396	99.50
2	2	0.50	398	100.00

4. What is the name of the phone company that provides local phone service?

PHCOMP	Frequency	Percent	Cum Freq	Cum Percent
0	48	12.06	48	12.06
1	348	87.44	396	99.50
2	2	0.50	398	100.00

Directions: Drivers' Right of Way Laws**Right-of-Way**

When no signs, symbols, or police tell you what to do, you must follow special laws.
Here are 3 of these laws:

1. Drivers must yield to pedestrians in these conditions:
 - When pedestrians are crossing the roadway at an intersection without a traffic light (*the crosswalk does not have to be marked*).
 - When the pedestrians are crossing the roadway in specially marked crosswalks.
 - When the driver is turning a corner and the pedestrians are crossing with the light.
 - When a blind pedestrian carrying a white cane or being led by a guide dog is crossing the street.
 - When pedestrians are crossing the sidewalk at a driveway or alley.
2. Drivers turning left must yield to oncoming cars going straight ahead.
3. Drivers entering a traffic circle must yield the right-of-way to drivers already in the circle.

5. If you are continuing on the same road through an intersection, who should yield to you?

☐

INTERSEC	Frequency	Percent	Cum Freq	Cum Percent
0	145	36.43	145	36.43
1	239	60.05	384	96.48
2	14	3.52	398	100.00

6. Who has the right of way if you are making a right turn on red and a jogger is crossing with the light?

RTURN	Frequency	Percent	Cum Freq	Cum Percent
0	38	9.55	38	9.55
1	348	87.44	386	96.98
2	12	3.02	398	100.00

Form: N R P Membership Application

Mail the coupon today –
NRP membership is only \$8

☐ 1 Year/\$8 ☐ 3 Years/\$20 ☐ 10 Years/\$45

Name _____
Address _____ (Please Print)
City _____ State _____ Zip _____

Date of Birth ____/____/____ HYAA
 Month Day Year

☐ I work full time. ☐ I work part time. ☐ I am retired.

Spouse's Name _____

Spouse's Date of Birth ____/____/____
 Month Day Year

☐ Check or money order enclosed, payable to NRP. (Send no cash.)
☐ Please bill me later.
☐ If you've worked in the field of education, check here to join the National Retired Teachers Association Division of NRP.

Mail to: NRP, P. O. Box 199, Long Beach, CA 90801

Dues are not deductible for income tax purposes. Annual dues include \$2.40 for *Modern Maturity*, 85¢ for the *Bulletin*. One membership also includes spouse. Please allow six weeks for delivery of your membership kit.

7. If you buy a membership for the period from 1998 to 2008, how much would you pay?

MEMB	Frequency	Percent	Cum Freq	Cum Percent
0	26	6.53	26	6.53
1	368	92.46	394	98.99
2	4	1.01	398	100.00

8. If you are married and decide to join NRP how much would your partner have to pay?

☐

NRP	Frequency	Percent	Cum Freq	Cum Percent
0	38	9.55	38	9.55
1	351	88.19	389	97.74
2	9	2.26	398	100.00

Form: Patient Medical History

ALL INFORMATION IS CONFIDENTIAL

INITIAL/ANNUAL PATIENT HISTORY

MEDICAL HISTORY

DO YOU NOW HAVE OR HAVE YOU EVER HAD:	YES	NO
a. Dizziness/blurred vision/severe or migraine headaches		
b. Epilepsy/convulsive seizures (fits)		
c. Nervous breakdown/fatigue/depression/emotional problems		
d. Lung problems/asthma/coughing blood/mucus		
e. Nagging cough or hoarseness		
f. Thyroid problems		
g. Heart problems/rheumatic fever/chest pains/shortness of breath		
h. High blood pressure/stroke/high blood fat/cholesterol		
i. Blood clots in legs/varicose veins (swollen veins)/numbness		
j. Liver problems (jaundice, mononucleosis, hepatitis)		
k. Gall bladder problems		
l. Indigestion or difficulty in swallowing		
m. Obesity/weight gain/weight loss (How much in how long?)		
n. Nutritional problems/bone or joint disease		
o. Kidney/bladder/urination problems or infections		
p. Change in bowel or bladder habits		
q. Colitis/polyps in colon or rectum/bleeding from rectum/frequent black stool		

9. If you are frequently tired and sad, on what line of the form should you indicate this?

☐

TIRED	Frequency	Percent	Cum Freq	Cum Percent
-9	1	0.25	1	0.25
0	23	5.78	24	6.03
1	363	91.21	387	97.24
2	11	2.76	398	100.00

10. If you frequently have heartburn after eating, on what line of the form should you indicate this?

HEARTB	Frequency	Percent	Cum Freq	Cum Percent
-9	1	0.25	1	0.25
0	92	23.12	93	23.37
1	294	73.87	387	97.24
2	11	2.76	398	100.00

Directions: Use of Cough Medicine

Indications: Temporarily Relieves Cough Due to Minor Throat and Bronchial Irritation as May Occur with a Cold.

DIRECTIONS: Follow dosage below:
Do Not Exceed 4 Doses in a 24-Hour Period.



ADULT DOSE (and children 12 years and over): 2 teaspoonfuls every 6 to 8 hrs.



CHILD DOSE

6 yrs. to under 12 yrs.
1 teaspoonful every 6 to 8 hrs.



2 yrs. to under 6 yrs.
1/2 teaspoonful every 6 to 8 hrs.

Under 2—Consult Your Doctor.

Warnings—A persistent cough may be a sign of a serious condition. If cough persists for more than 1 week, tends to recur, or is accompanied by fever, rash, or persistent headache, consult a doctor. Do not take this product for persistent or chronic cough such as occurs with smoking, asthma, emphysema, or if cough is accompanied by excessive phlegm (mucus) unless directed by a doctor.

11. What is the maximum number of teaspoons an adult should take in 24 hours?

TEASP	Frequency	Percent	Cum Freq	Cum Percent
-9	1	0.25	1	0.25
0	222	55.78	223	56.03
1	173	43.47	396	99.50
2	2	0.50	398	100.00

12. Mr. Jones smokes and has a smoker's cough. What is the maximum number of doses he should take per day?

SMOKE	Frequency	Percent	Cum Freq	Cum Percent
-9	1	0.25	1	0.25
0	69	17.34	70	17.59
1	322	80.90	392	98.49
2	6	1.51	398	100.00

Chart: Mail in Rebate for Ladies Underwear

HERE'S HOW TO GET UP TO \$4.00 BACK BY MAIL ON
LADIES' & GIRLS' PANTIES AND SOCKS:

To receive a \$1.00 or \$2.00 refund on each of the two product categories listed below (maximum \$4.00), Mail this form, your cash register receipt(s) and the required UPC symbol(s) to:

REBATE OFFER • P.O. BOX 7062 • BIG LAKE, MN 55309-7062

PRODUCT CATEGORY (CHECK ONLY 1 BOX PER CATEGORY)

LADIES' & GIRLS'
PANTIES

☐

\$1.00
UPC symbol from
one 3-pack

or

☐

\$2.00, UPC symbols
from two 3-packs or
one 6-pack

LADIES' & GIRLS'
SOCKS

☐

\$1.00
UPC symbol from
one 3-pack

or

☐

\$2.00, UPC symbols
from two 3-packs
or one 6-pack

Please send me a total refund of. . . .

\$

13. How many pairs of socks will you need to buy to qualify for the \$2 rebate?

REBATE	Frequency	Percent	Cum Freq	Cum Percent
-9	1	0.25	1	0.25
0	38	9.55	39	9.80
1	354	88.94	393	98.74
2	5	1.26	398	100.00

14. What additional items must be mailed with the form in order to receive a refund?

☐

REFUND	Frequency	Percent	Cum Freq	Cum Percent
-9	1	0.25	1	0.25
0	131	32.91	132	33.17
1	261	65.58	393	98.74
2	5	1.26	398	100.00

Chart: Taxi Rates**SPEEDY TAXI**

ZONE	FIRST 1/7 MILE	EACH ADDITIONAL 1/7 MILE
1	\$ 1.50	\$ 0.20
2	\$ 2.00	\$ 0.30
3	Flat Rate -- \$25.00	

Note: All passengers ride for the price of one.

EXPLANATION OF FARE ZONES:

1 - All routes within downtown core.

2 - All routes within suburban areas,
and between downtown core and
suburban areas.

3 - One-way travel from the Airport.

15. If two people are sharing a cab from the airport, how much would each person pay if they split the bill?

CAB	Frequency	Percent	Cum Freq	Cum Percent
-9	1	0.25	1	0.25
0	43	10.80	44	11.06
1	347	87.19	391	98.24
2	7	1.76	398	100.00

16. If you travelled only within suburban areas, for a distance of 1 mile, how much would you pay?

TRAVEL	Frequency	Percent	Cum Freq	Cum Percent
-9	1	0.25	1	0.25
0	197	49.50	198	49.75
1	179	44.97	377	94.72
2	21	5.28	398	100.00

Form: Tax Returns for Income and Net Profits**COMPUTATION OF TAXABLE INCOME**

EARNED INCOME (full or part-time income from salaries, wages, commissions, bonuses, fees, tips). A copy of the earnings and tax statement (Form W-2 and/or 1099) from each employer **MUST** be attached to this return.

EMPLOYER

ADDRESS

INCOME

EMPLOYER	ADDRESS	INCOME
_____	_____	_____
_____	_____	_____
_____	_____	_____

5. Sub-total earned income (add income from above employer(s)) _____

6. Less allowable employee business expenses and/or nontaxable income _____

7. TOTAL EARNED INCOME (Line 5 less line 6) _____

NET PROFITS: (If net loss, zero must be entered on appropriate line)

8. Profits from business, profession, farm as sole proprietor (Attach Form C/F) _____

9. Profits from business, profession, farm as partner (Form K-1) _____

10. Profits from royalties, patents, fees, honoraria, etc. _____

11. TOTAL NET PROFITS (add lines 8 through 10) _____

TOTAL TAXABLE INCOME:

12. Total earned income and net profits (line 7 through 11) _____

I declare under the penalties provided by law that this return has been examined by me and is to the best of my knowledge and belief true, correct and complete.

13. _____

14. _____

Signature of Taxpayer

Date

17. Which two deductions may one use to reduce the Total Earned Income one reports?

REDUC E	Frequency	Percent	Cum Freq	Cum Percent
-9	1	0.25	1	0.25
0	109	27.39	110	27.64
1	237	59.55	347	87.19
2	51	12.81	398	100.00

18. If one earns \$15,000 in income (\$3,000 of which is non-taxable), and makes another \$1,000 in profits from a partnership, what number should be entered on line 12?

PROFIT	Frequency	Percent	Cum Freq	Cum Percent
-9	1	0.25	1	0.25
0	88	22.11	89	22.36
1	260	65.33	349	87.69
2	49	12.31	398	100.00

Directions: Stuffing Mix Cooking Instructions

DIRECTIONS

- 1 package Stuffing Mix
 1 2/3 cups water*
 1/4 cup (1/2 stick) butter or margarine

*For more moist stuffing, increase water by 2 tablespoons; for less moist stuffing, decrease water by 2 tablespoons.

SAUCEPAN

1. Combine contents of vegetable/ seasoning packet, water and butter in medium saucepan. Bring to a boil. Reduce heat; cover and simmer 5 minutes.

2. Stir in stuffing crumbs. Cover, remove from heat and let stand 5 minutes. Fluff with fork

MICROWAVE

1. Combine contents of vegetable/ seasoning packet, hot water, and butter, cut in pieces, in 1 1/2-quart microwavable bowl. Stir in stuffing crumbs.
2. Cover and cook at HIGH 5 to 6 minutes.** Fluff with fork.

**Ovens vary. Heating time is approximate.

19. According to the directions, to make dryer stuffing what can you do?

☐

DRYER	Frequency	Percent	Cum Freq	Cum Percent
-9	1	0.25	1	0.25
0	17	4.27	18	4.52
1	377	94.72	395	99.25
2	3	0.75	398	100.00

20. In the sauce pan method, how long do you cook the stuffing after adding the bread crumbs?

COOK	Frequency	Percent	Cum Freq	Cum Percent
-9	1	0.25	1	0.25
0	145	36.43	146	36.68
1	249	62.56	395	99.25
2	3	0.75	398	100.00

Chart: Washing Machine Trouble Shooting List

Check these points **BEFORE** you call for service.

IF YOUR WASHER

WON'T AGITATE OR FILL	WON'T SPIN OR DRAIN	STOPS	POSSIBLE REASON -- • DO THIS TO CORRECT
•	•	•	Replace fuse. Reset circuit breaker
•	•	•	Turn Control past "OFF", pull out.
•	•		Straighten hoses. Eliminate kinked hoses.
	•		Off Balance Load. Turn Controls OFF. Redistribute clothes evenly. Restart Control.
	•		Suds Lock--caused by too much suds. Rewash without detergent. Use correct amount of low-sudsing detergent.
•			Hose Filter Screens plugged. Remove hoses from faucets. Clean screens and reinstall hoses.

21. Stretching hoses, or removing bends in hoses could solve which 2 problems?

STRETCH	Frequency	Percent	Cum Freq	Cum Percent
-9	1	0.25	1	0.25
0	109	27.39	110	27.64
1	273	68.59	383	96.23
2	15	3.77	398	100.00

22. Your washer won't fill or agitate. However, the spin and drain cycles work properly. What is a likely problem?

WASHER	Frequency	Percent	Cum Freq	Cum Percent
-9	1	0.25	1	0.25
0	125	31.41	126	31.66
1	254	63.82	380	95.48
2	18	4.52	398	100.00

Chart: Medicare Benefits Payment Schedule**MEDICARE HOSPITAL INSURANCE (PART A) COVERED SERVICES FOR 1997**

Services	Benefit	Medicare Pays	You Pay
HOSPITALIZATION	First 60 days	All but \$760	\$760
Semiprivate room and board, general nursing and other hospital services and supplies. (Medicare payments based on benefit periods; see pg. 3)	61st to 90th day	All but \$190 a day	\$190 a day
	91st to 150th day	All but \$380 a day	\$380 a day
	Beyond 150 days	Nothing	All costs
SKILLED NURSING FACILITY CARE	First 20 days	100% of approved amount	Nothing
Semiprivate room and board, skilled nursing and rehabilitative services and other services and supplies. (Medicare coverage based on benefit periods; see pg. 3)	Additional 80 days	All but \$95 a day	Up to \$95 a day
	Beyond 100 days	Nothing	All costs

23. What was the amount of the deductible an individual paid for Inpatient Hospital Services for the first 30 days?

☐

IHS	Frequency	Percent	Cum Freq	Cum Percent
-9	1	0.25	1	0.25
0	188	47.24	189	47.49
1	183	45.98	372	93.47
2	26	6.53	398	100.00

24. Mr. Jones entered a nursing home on January 1 of 1997. How much did Part A Medicare pay for his care in July 1997.

☐

NHOME	Frequency	Percent	Cum Freq	Cum Percent
-9	1	0.25	1	0.25
0	98	24.62	99	24.87
1	265	66.58	364	91.46
2	34	8.54	398	100.00

Charts: Nutritional Information for Cereal

Nutrition Facts		
Serving Size 3/4 Cup (29g/1.1 oz.)		
Servings per Container About 17		
Amount Per Serving	Cereal with 1/2 Cup Vitamin A & B Cereal Skim Milk	
Calories	90	130
Calories from Fat	5	5
% Daily Value **		
Total Fat 0.5g*	1 %	1 %
Saturated Fat 0g	0 %	0 %
Polyunsaturated Fat 0g		
Monounsaturated Fat 0g		
Cholesterol 0mg	0 %	0 %
Sodium 230mg	10 %	12 %
Potassium 170mg	5 %	11 %
Total Carbohydrate 24g	8 %	10 %
Dietary Fiber 5g	20 %	20 %
Soluble Fiber 0g		
Insoluble Fiber 5g		
Sugars 5g		
Other Carbohydrate 14g		
Protein 3g		

25. What % of the Daily Value for sodium do you get in a serving of cereal and 1/2 cup skim milk?

SODIU M	Frequency	Percent	Cum Freq	Cum Percent
-9	1	0.25	1	0.25
0	136	34.17	137	34.42
1	249	62.56	386	96.98
2	12	3.02	398	100.00

26. How many calories are added to a serving of cereal if one-half cup of skim milk is used?

CALORIES	Frequency	Percent	Cum Freq	Cum Percent
-9	1	0.25	1	0.25
0	214	53.77	215	54.02
1	171	42.96	386	96.98
2	12	3.02	398	100.00

Charts: Telephone Discounted Time Periods

Discounted Time Period	
	M T W Th F S Su
8 A.M. to 5 P.M.	Weekday
5 P.M. to 10 P.M.	Evening
10 P.M. to 8 A.M.	Night & Weekend
Calls that span two time periods will be charged the rate in effect for each minute of the call.	

27. Your son and daughter live in the same city out-of-state. You call your daughter at 11:37 a.m. on Saturday. You call your son at 9:30 p.m. on Wednesday. Both calls last 5 minutes. Which call is cheaper?

SON	Frequency	Percent	Cum Freq	Cum Percent
-9	1	0.25	1	0.25
0	230	57.79	231	58.04
1	149	37.44	380	95.48
2	18	4.52	398	100.00

28. If your call begins at 4:57 p.m. on Monday, and lasts for 7 minutes, what is/are the applicable rate(s) for your call?

TOTAL SCORE

RATE	Frequency	Percent	Cum Freq	Cum Percent
-9	1	0.25	1	0.25
0	218	54.77	219	55.03
1	148	37.19	367	92.21
2	31	7.79	398	100.00

Analysis Variable : TOTAL					
N	Mean	SD	Minimum	Median	Maximum
398	19.6	5.4	2.0	20.0	28.0

B30. PLEASE RECORD THE TIME YOU COMPLETE THE TEST HERE:

____ : ____ AM / PM

Analysis Variable : totlt					
N	Mean	SD	Minimum	Median	Maximum
367	66.9	70.3	0.0	45.0	675.0

totlt	Frequency	Percent	Cum Freq	Cum Percent
.	31	100.00	31	100.00

B31. IF YOU DID NOT COMPLETE THE TEST ALL AT ONCE, PLEASE RECORD THE APPROXIMATE TIME YOU STOPPED FOR INTERRUPTIONS (for example, a phone call):

____ MINUTES

Analysis Variable : MINUTES					
N	Mean	SD	Minimum	Median	Maximum
316	18.6	55.2	0.0	0.0	480.0

MINUTES	Frequency	Percent	Cum Freq	Cum Percent
-9	82	100.00	82	100.00