Memory Assessment Report

Patient Name: Aryan

Assessment Date: February 28, 2025

Assessment Time: 03:53 PM

Assessment Number: 1

# Assessment Details

**Question:** A square has how many corners? **Answer:** 4

**Question:** Can you spell the word "apple" backward? **Answer:** aple

**Question:** If you add 10 and 5, what do you get? **Answer:** 15

**Question:** What do you do with a blanket? **Answer:** cover

**Question:** What do you use an umbrella for? **Answer:** rain

**Question:** What do you use to write with? **Answer:** pen

**Question:** What do you do with a toothbrush? **Answer:** brush

**Question:** Can you list four different fruits? **Answer:** apple, orange

**Question:** If it’s raining outside, what would you take with you? **Answer:** umbrella

**Question:** What is a common household pet? **Answer:** dog

# Clinical Observations

Memory Performance Observations:

• Response Time and Clarity:

• Behavioral Observations:

• Additional Notes:

# Recommendations

Based on today's assessment: