

# **Cognitive Assessment Report**

Date: October 27, 2023

#### **Overview**

This report summarizes the cognitive assessment results based on several tasks, including Stroop Colour naming, Memory Recall, and Object-Purpose Matching (represented by Image Recall score, given the games available), alongside speech and sentiment analysis. The analysis aims to provide a preliminary indication of cognitive function. This is not a substitute for a formal neuropsychological evaluation.

### **Metrics Explanation**

- \* Stroop Colour: Measures the ability to inhibit cognitive interference. The score reflects the time taken or errors made while naming the colour of a word when the word spells a different colour (e.g., the word "blue" printed in red).
- \* Memory Game: Assesses short-term memory and attention. The score represents the number of successful matches made in a memory game.
- \* Image Recall: Assesses visual memory and recall abilities. The score reflects the number of images successfully recalled after a delay. It's considered a proxy for the more general cognitive domain of object-purpose matching, which relies on memory, association, and executive function.
- \* Speech Metrics: Provides information about speech patterns, including pause time, filler word frequency, lexical diversity, and speech fluency. These metrics can indicate cognitive processing speed, hesitation, and language skills.
- \* Sentiment Analysis: Evaluates the emotional tone expressed in speech, providing insights into mood and emotional state. It uses a weighted score to quantify the overall sentiment.

#### **Memory Game Analysis**

- \* Score: 1
- \* Interpretation: A score of 1 on the memory game suggests very limited short-term memory performance within the context of this evaluation. This could be influenced by several factors, including lack of familiarity with the game, attentional difficulties, or genuine memory impairment.
- \* Considerations: This score alone cannot definitively diagnose a memory problem. Further assessment is needed to determine the underlying cause.

#### **Image Recall**



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- \* Score: 0
- \* Interpretation: A score of 0 indicates no successful image recall. This could reflect difficulties in encoding, storing, or retrieving visual information. As a proxy for object-purpose matching, this may point to challenges in associating objects with their functions, which is a more complex cognitive process.
- \* Considerations: Similar to the Memory Game, this single score is not conclusive. Visual processing speed, attention, and motivation could play a role.

### **Stroop Colour**

- \* Score: 29
- \* Interpretation: The Stroop test measures cognitive flexibility and selective attention. A score of 29 requires careful interpretation within the specific context of the test administration (e.g., time taken, number of errors). Generally, lower scores (time taken) or fewer errors indicate better performance. Without the context (like the mean or standard deviation from a control group), it is difficult to infer definitively whether this score falls within or outside the normal range.
- \* Considerations: Performance can be influenced by age, education level, and pre-existing cognitive conditions.

## **Speech Analysis**

\* Total time: 1.86 seconds

\* Total pause time: 1.86 seconds

\* Pause density (%): 50.0%

\* Repeated words: 1.0

\* Filler words: 0.0

\* Filler frequency (%): 0.0%

\* Unique words: 1.0

\* Lexical diversity (%): 33.3333%\* Speech fluency (words/sec): 75.17

- \* Interpretation: The speech metrics reveal notable characteristics. The pause density is high (50%), and the lexical diversity is low (33.3333%). This indicates hesitations and a limited vocabulary within the provided speech sample. The speech fluency is unusually high. These metrics, especially combined with the very short total time, are most likely artifacts from an extremely short speech sample, so are probably unreliable.
- \* Considerations: The speech sample is limited ("Ok, bye bye"), making robust analysis challenging. The high pause density could indicate word-finding difficulties, anxiety, or simply the brevity of the utterance.

#### **Sentiment Analysis**

\* Label: Positive



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\* Weighted score: 67.288

- \* Interpretation: The sentiment analysis indicates a positive emotional tone in the speech.
- \* Considerations: Given the brevity of the speech, the sentiment analysis should be interpreted cautiously.

## **Heuristic Cognitive Risk Assessment**

Based on the current assessment:

- \* Strengths: Positive sentiment, but limited data.
- \* Weaknesses: Low scores on memory and image recall, high pause density and limited lexical diversity in the speech sample (though the sample is extremely short and may be an artifact).
- \* Overall: There are indications of potential cognitive concerns, particularly related to memory and speech patterns. However, the limited data available and the potential for confounding factors (e.g., unfamiliarity with the tasks, brevity of speech sample) necessitate further evaluation.

## **Integrated Interpretation**

The combination of low scores in memory-related tasks and speech characteristics (if the speech sample were larger) suggests potential cognitive challenges. The Stroop score is not interpretable without additional context. The positive sentiment is a potentially mitigating factor, but cannot override the concerns raised by the other metrics.

#### Recommendations

- 1. Comprehensive Neuropsychological Evaluation: A full neuropsychological assessment by a qualified professional is strongly recommended. This evaluation should include standardized tests of memory, attention, executive function, language, and visual-spatial abilities.
- 2. Detailed Medical History: A thorough review of the individual's medical history, including any neurological or psychiatric conditions, medications, and family history of cognitive impairment, is essential.
- 3. Consider Speech-Language Pathology Consultation: If speech patterns are indeed a concern, consultation with a speech-language pathologist may be beneficial to assess language skills and identify any underlying communication disorders.
- 4. Address Potential Confounding Factors: Rule out any potential contributing factors such as sleep deprivation, stress, anxiety, or depression.
- 5. Repeat Assessment: Repeat the cognitive games after a period of familiarization to reduce the impact of novelty and learning effects.

It is a test done by AI; if the score is too high it is suggested to consult a doctor immediately, if not then also it is better to meet a doctor.



## **IMPORTANT DISCLAIMER**

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