

**75+**

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Prepared to answer questions on the phone: 1 Yes 2 No

If it isn't a suitable time, ask to call back at another time.

Date \_\_\_\_\_ at \_\_\_\_\_ o'clock

If the study participant seems reluctant, ask if there is a relative we can call and ask a couple of questions.

Name of relative: \_\_\_\_\_ Relation: \_\_\_\_\_

Phone: \_\_\_\_\_

NB! The questions we require answers to are highlighted in grey. Feel free to pose the other questions as well, to get an idea of the participant's condition. The questions are written in bold.

At first, I would like to go over some control questions	Correct	Wrong	Not carried out
<b>1. What is your full name?</b>	1	2	3
Reply: _____			
<b>2. How old are you?</b>	1	2	3
Reply: _____			
<b>3. When were you born?</b>	1	2	3
Reply: _____			
IF NEEDED: <b>What year?</b>	1	2	3
Reply: _____			

**4. What is your full address?** 1 2 3

Reply: \_\_\_\_\_

**5. What type of accommodation is it?** 1 2 3

- |                                    |                            |
|------------------------------------|----------------------------|
| 1 Detached home                    | 2 Apartment/flat           |
| 3 Service apartment                | 4 Terrace house/town house |
| 5 Retirement home                  |                            |
| 6 Nursing home, long-term hospital |                            |
| 7 Hospital                         | 8 Group home               |
| 9 Other: _____                     | 10 Don't want to answer    |

**5a. If the study participant does not live in private accommodation****When did you move?** \_\_\_\_\_**What was the reason behind the move?** \_\_\_\_\_**6. If you live together with other people, with who?**

- |                              |                                   |
|------------------------------|-----------------------------------|
| 1 Lives alone                | 2 Spouse/fiancé/live-in partner   |
| 3 Twin                       | 4 Sibling/s, amount: _____        |
| 5 Adult child, amount: _____ | 6 Adult grandchild, amount: _____ |
| 7 Other relative             | 8 Friend                          |
| 9 Paid help                  | 10 Don't know                     |
|                              | 11 Don't want to answer           |

**6a. If the study participant lives alone, which relative do you have the most contact with/knows you the best? (relation)**

\_\_\_\_\_

**8a. How has your health been recently?**

1 Excellent      2 Good      3 Not too bad      4 Bad

**b. MARK ALL AILMENTS THE PARTICIPANT MENTIONS**

1 Cardiac arrest      2 Cardiac arrest/stroke      3 Migraine  
 4 Epilepsy      5 Diabetes      6 Goiter  
 7 High blood pressure      8 Blood clots      9 Parkinson's disease  
 10 Skull injury      11 Other: \_\_\_\_\_

Comments

\_\_\_\_\_

**c. Have you seen a doctor/physician or gone to hospital the past 6 months?**

1 Yes, doctor      2 Yes, hospital      3 No      4 Not asked

If yes, **For what?** \_\_\_\_\_

**d. How is your hearing?** If reduced/considerably reduced: does it apply to both ears or only one?

1 Excellent      2 Good      3 Pretty good  
 4 Bad      5 Deaf, almost deaf

Do you use hearing aids?

1 Yes      2 No      3 Don't know      4 Don't want to answer

**9. Do you receive help from someone in your day-to-day life? For example with...**

1 Shopping and cooking      2 Household/domestic work  
 3 Personal care (e.g. dressing, bathing)  
 4 Taking care of finances      5 Reminders of taking medicine  
 6 Other      7 No      8 Don't know      9 Don't want to answer

**Why do you need/receive help?**

1 I have problems moving  
 2 I have problems with my memory or judgement  
 3 Other  
 4 Don't know  
 5 Don't want to answer

**10. Has your memory worsened over the past two years, by and large?**

1 Yes  
 2 No  
 3 Don't know  
 4 Don't want to answer

**Telephone protocol**

3(4)

**a. Have you noticed that you...?**

- 1 Forget details and errands, e.g. things on the shopping list
- 2 Forget people's names
- 3 Forget to go visit people or that you are expecting guests
- 4 Find it difficult to locate places you are supposed to know where they are
- 5 Forget words for different things
- 6 Other \_\_\_\_\_
- 7 No
- 8 Don't know
- 9 Don't want to answer

**b. Have you ever asked a physician about your memory?**

- 1 Yes                      2 No                      3 Not asked

**c. If yes, What did the physician say about the cause?**

\_\_\_\_\_

**11. Now I would like to ask you some questions regarding your memory.**

**1. What year is it now?**

Answer	Correct	Wrong	Not carried out
_____	1	2	3
<b>2. What season?</b>	1	2	3
<b>3. What month is it?</b>	1	2	3

**2. What season?**

**3. What month is it?**

**4. What's today's date?**  
± 1 day

_____	1	2	3
_____	1	2	3

**5. What day of the week is it?**

**12. I am going to mention three objects. When I am done, I want you to repeat them. Memorize the objects, because I will ask you to repeat them again in a few minutes. "Key, Toothbrush, Lamp". Can you please repeat?**

	Correct	Wrong/fails	Not carried out
<b>Key</b>	1	4	5
<b>Toothbrush</b>	2	4	
<b>Lamp</b>	3	4	

(If necessary, repeat until all three have registered. Repeat up to 5 times, but do not give out any points after the first attempt)

1                      Amount of repetitions:  
\_\_\_\_\_

**13. Can you count backwards, by beginning at 20, and continually reducing it by three?**

(write the answers)

1 \_\_\_\_\_ 2 \_\_\_\_\_ 3 \_\_\_\_\_ 4 \_\_\_\_\_ 5 \_\_\_\_\_ 6 \_\_\_\_\_ 7 \_\_\_\_\_

Not carried out

**14. Who is the current prime minister of Sweden?**

- 1 Stefan Löfven                      2 Other answer                      3 Don't know                      4 Don't want to answer

**15. Who was the prime minister before him?**

- 1 Fredrik Reinfeldt                      2 Other answer                      3 Don't know                      4 Don't want to answer

**16. Which were the three objects I asked you to memorize a little while ago?**

	Correct	Wrong/Fails	Not carried out
(Key)	1	2	3
(Toothbrush)	1	2	3
(Lamp)	1	2	3

**b. Which of the following words did I mention to you a little while ago?**

		Correct	Wrong/Fails	Not carried out
Key, Ring, Chair	(Key)	1	2	3
Painting, Toothbrush, Door	(Toothbrush)	1	2	3
Pen, Table, Lamp	(Lamp)	1	2	3

I will now mention 2 things which are similar to one another in one or several ways. The idea is that you will tell me the most significant similarity.

**17. In what way are a dog and a lion similar?**

- 1 Correct (both are animals/mammals/furry animals/predators)
- 2 Wrong (fur, legs)
- 3 Cannot mention any similarities
- 4 Completely incorrect associations
- 5 Don't know
- 6 Doesn't want to answer

**18. Now anew, how are an orange and a banana similar?**

- 1 Correct (fruit)
- 2 Half-way correct (both sustenance, both have to be peeled, same colour)
- 3 Wrong (both contain calories, their shapes differ)
- 4 Don't know
- 5 Doesn't want to answer

**19. A table and a chair?**

- 1 Correct (furniture)
- 2 Half-way correct (kitchen furnishing, necessary at meals)
- 3 Wrong (stands on 4 legs, made of wood, sit on one of them)
- 4 Don't know
- 5 Doesn't want to answer

I would like to ask you a bit about your emotions and how your mood has been.

**20. Over the past year, have you had periods lasting two weeks or longer when you have...?**

	NO	YES
a. ...been sad, down, depressed	1	2
b. ...lost your appetite, lost weight (1 kg per week/5 kgs in total without dieting)	1	2
c. ...had trouble with falling asleep, sleeping or waking up too early	1	2
d. ...always been tired and felt exhausted all the time	1	2
e. ...had increased loss of concentration and more difficulty thinking	1	2

If any symptom seems to be caused by a temporary physical ailment or a reaction to a recent tragedy, note which symptoms were affected and explain:

**21. Do you use sleeping medication?**

If yes, what: \_\_\_\_\_

How often: (per week) \_\_\_\_\_

**22. Do you take dietary supplements?**

If yes, what: \_\_\_\_\_

How often: (per week) \_\_\_\_\_

**Interviewer's evaluation after the interview:**

- 0. Confused/has bad memory
- 1. Uninterested/not a positive attitude
- 2. Neutral attitude
- 3. Interested/positive attitude

**Thank you so much!**

