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Online™

# Study of Osteoporotic Fractures (SOF)

## Study Collection Forms

### Visit 1

### Cognitive Function

MMSE

Form Type: Clinic Examination

#### LEGEND:

**Raw form variable** names are located next to the question they represent and do not have a border around the variable name.

**Calculated variable** names are derived from other variables and have a border around the variable name. The calculated variables names are located in close proximity to the questions from which they were derived.

Some of the questions and measurements on these forms are not being released, and therefore no variable name is provided for them.

Now I'd like to ask you some questions to test your memory. Since there is little scientific information on how good the average or typical person's memory is, some of our questions are designed to provide this basic information.

1. What is today's date? [IF NECESSARY: What is the month?] [Record participants' answer below.]

	Record answer here ↓	Correct	Missed by ≤ 5 days	Missed by 1 month	Missed by > 1 month	Refused	Don't Know
Month	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Date	_____	<input type="checkbox"/>	Missed by 1 or 2 days	Missed by 3 to 5 days	Missed by > 5 days	Refused	Don't Know
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

2. I am going to name 3 objects. After I have said them, I want you to repeat them. Remember what they are because I'm going to ask you to name them again in a few minutes.

**"APPLE"....."TABLE"....."PENNY"**

[AFTER YOU HAVE SAID ALL THREE ONCE, ASK SUBJECT TO REPEAT.]

	Correct	Error	REF	DK
Apple	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Table	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Penny	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

[IF NECESSARY, REPEAT OBJECTS UNTIL ALL 3 ARE LEARNED]

If not correct on first attempt, was participant able to learn all 3 in 6 attempts or less?  Yes  No

3. Now I am going to spell a word forwards and I want you to spell it backwards, that is, in reverse order. The word is WORLD. W-O-R-L-D

[Repeat spelling if necessary]

	Correct	Error	REF	DK
Record Spelling	__(D) <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	__(L) <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	__(R) <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	__(O) <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	__(W) <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

4. Now what are the 3 objects I asked you to remember? [Code correct even if not repeated in order listed]

	Correct	Error	REF	DK
Apple	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Table	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Penny	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Now copy the design that you see printed on this card. [HAND RESPONDENT PENTAGON CARD]

Number of figures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Number of enclosed figures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Number of 5-sided figures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Number of "regular" 5-sided figures (sides $\leq$ 2:1)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Intersection of figures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	correct (four-sided figure)	incorrect	no intersection
unable to draw (0 on all of above)	<input type="checkbox"/>		

[Paste design form here]

