



## INSTRUCTIONS FOR THE CDR INFORMANT INTERVIEW (CDI) FORM

### I. General Instructions

The CDR informant interview will be administered either in person, in cases where the informant is present at the time of potential participant selection to Stage II, (at the clinic, or in the home or LTC facility) or over the phone. For cases where the interview is administered in person, written consent should be obtained from the informant. For cases where it is administered over the phone, only verbal consent is needed.

**NOTE THAT FOR ANY PARTICIPANT WHO BRINGS AN INFORMANT WITH HIM/HER TO THE VISIT, THE CDI IS TO BE ADMINISTERED TO THE INFORMANT. FOR ALL PARTICIPANTS, THE SELECTION ALGORITHM WILL DETERMINE WHO GOES ON TO STAGE 2 TO COMPLETE THE CDI OVER THE PHONE AT A LATER TIME.**

The CDR Informant (CDI) interview is the most informative part of the CDR interview, more so than the CDR participant interview (CDP) because in many cases individuals with early memory problems and dementia might not give an accurate representation of his or her impairments and daily functioning. The CDP is administered to all participants as part of Visit 6, but the CDI is only administered to those participants selected for further evaluation in stage II of Visit 6. The CDP also includes a question asking for consent to contact an informant to complete this CDI form.

The examiner is asked not only to ask questions of the informant about the participant and his or her daily functioning, but also about the nature and duration of their relationship. In addition, the examiner is asked to rate the quality of the informant, at the end of the interview. This is because, theoretically, the informant could also be cognitively impaired or may not know the participant's daily functioning particularly well.

At all points in the evaluation, the subject's name should be inserted wherever {S} is listed. Please remind the informant that questions are based upon changes as compared to the past. In some instances, the informant might need to be reminded this at several points throughout the examination.

If the informant states that the participant is doing certain activities less because of physical, but not mental limitations, the reason for this limitation should be clarified, and if it is purely for physical reasons, should not be marked as a change.

At the end of the interview, the interviewer should rate how well the informant knows the participant, based on how comfortable he or she seemed answering the questions in the interview. In addition, the interviewer should record whether this interview was completed in person (either in clinic, at a participant's home or LTC facility) or over the phone. The form of consent obtained should also be recorded.

See the CDR-Summary Q X Q for details about scoring the CDR, in combination with the online training module for the CDR.

The Informant Interview (CDI) should ideally be completed within 90 days of stage II (if not completed at that visit in person). If more than 90 days has passed by the time of the CDI, make note of the lapse in time using notelogs in both forms. The CDR Summary score (CDS) will be based on the interview results at the time of the CDI.

**II. Detailed Instructions for each Item, including recommended ways to rephrase certain items if not clear or well-understood by the participant. For all items, the options may need to be read if the response does not clearly fit into one of the defined categories.**

0a. Enter the date on which the participant was seen in the clinic.

0b. Enter the staff ID for the person who completed this form.

11. A “change over the past year” does not mean that the change itself occurred during this past year, but rather that the change occurred at some point in the past, and is still a problem during the past year.

20. Can rephrase, if participant does not understand: Does {S} start talking about something and then seem to forget what he or she was talking about?

22. For participants in a nursing home or who are bedbound at home, can rephrase, “Does {S} ever get lost indoors, or have difficulty finding way to the bathroom or other rooms?”

Items 23-40. As with #11, a “change over the past year” does not mean that the change itself occurred during this past year, but rather that the change occurred at some point in the past, and is still a problem during the past year.

27. Can rephrase as: “Does {S} have less interest in doing chores or activities?”

28. Some examples might be difficulty solving problems at work, for people who are working, or difficulty solving problems with family, or following recipes or cooking for someone who had previously been able to do that.

32. Can rephrase as: “Has {S} been driving unsafely, or having accidents or near misses?”

34. Select 2 or 3 of the appliances: in all participants, ask about television, plus select 1-2 more.

37. Can add, “By a balanced meal, meaning a healthy meal.”

Initiate the interview using one of the following scripts.

**For phone calls:**

"This is (name) from the Atherosclerosis Risk in Communities Study". Your name was given to us by {S} as someone who could tell us about {S}'s day-to-day function and thinking. Would it be alright if I asked you some questions about (his/her) memory and thinking? This call should not take more than 15 or 20 minutes total."

**For In-person visits, when informant is at clinic visit:**

"Thank you for coming to today's visit with {S}. We need to collect a little more information as part of today's visit, and would like to ask you questions about {S}'s day-to-day function and thinking. It should not take us more than 15 or 20 minutes."

Spouse

Sibling

Child

Other relative

Friend

**Q1.**

Every day or every other day

Between one and three times a week

Once a month

A few times a year or less often

**Q3.**

Lifelong mental retardation

Severe illness

Depression

Other

**Q8a.**



Mother

Father

Sibling

**Q9a.**

No (or no evidence of)  
Slight or possible  
Definite

**Q11.**

Slow, gradual start

They started very quickly, and have been about the same

They started quickly, but have continued to worsen since then

Don't know

**Q11a.**

No (or no evidence of)

Rarely (once a week or less)

Between rarely and frequently

Frequently (every day or more often)

**Q13-16, 19-21**



No (or no evidence of)

Rarely (once a week or less)

Between rarely and frequently

Frequently (every day or more often)

Never did

**Q18.**

No (or no evidence of)

Rarely (once a week or less)

Between rarely and frequently

Frequently (every day or more often)

Never was able to follow directions

**Q22.**

Remembers without written or verbal reminders

Remembers but with aid of notes, calendar

Remembers with verbal reminders on day

Usually forgets appointments

Never kept track of appointments

**Q17.**

As good as they have ever been

Good, but not as good as before

Fair, may be unable in some circumstances

Poor

**Q24.**



No (or no evidence of), as good as they have ever been

Yes, minimal difficulty

Yes, considerable changes (requires assistance)

Yes, unable to do these things at all

Never did these things

**Q25-26**

No (or not evidence of)

Yes, minimal change

Yes, considerable changes

**Q27**

No (or no evidence of)

Slight or possible

Definite yes

**Q28.**

Yes

No

Retired, and not working at volunteer jobs

**Q29.**



No (or no evidence of)

Yes, slightly

Yes, completely

**Q30.**

No (or no evidence of), as good as they have ever been

Yes, minimal difficulty

Yes, requires assistance

Yes, unable to do these things at all

Never did these things

**Q31.**

No

Some minor concerns

Significant safety concerns

Ceased driving because of safety

Never drove or ceased driving for physical or sensory reasons

**Q32.**

No (or no evidence of), as good as they have ever been

Yes, but not as good as before

Yes, definitely decreased

Never did any household chores

**Q33.**



No (or no evidence of)

Yes, but only briefly

Yes, more than briefly but eventually mastered

Yes, never mastered

Never used any

**Q34.**

No (or no evidence of)

Yes, slightly

Yes, requires assistance

Yes, unable to do these at all

Never had hobbies or pastimes

**Q35.**

No (or no evidence of)

Yes, slightly

Yes, requires assistance

Yes, unable to do these at all

Never did

**Q36-37.**

Completely independent without supervision or concerns

Somewhat dependent on others for non-physical reasons

Anything worse

**Q38.**



No

Yes, urinary incontinence

Yes, bowel incontinence

Yes, both urinary and bowel incontinence

**Q40.**

Good

Fair

Poor

**Q58-59.**

No

Yes, mild extenuating circumstances

Yes, significant extenuating circumstances

**Q59a.**

Normal level

Daily functioning is questionably impaired on cognitive grounds

Daily functioning is mildly but definitely impaired on cognitive grounds

Daily functioning is at least moderately impaired on cognitive grounds

**Q60.**