

Supplemental Attachment for Clinical Evaluation Report

These rating categories MAY be used in more complex cases when more detail is DESIRED by the clinician or court.

Cognitive Functioning

1. Sensory Acuity (detection of visual, auditory, tactile stimuli)

Level of impairment: None Mild Moderate Severe Not eval.

Describe:

2. Motor Activity and Skills (active, agitated, slowed; gross and fine motor skills)

Level of impairment: None Mild Moderate Severe Not eval.

Describe:

3. Attention (attend to a stimulus; concentrate on a stimulus over brief time periods)

Level of impairment: None Mild Moderate Severe Not eval.

Describe:

4. Working memory (attend to verbal or visual material over short time periods; hold ≥ 2 ideas in mind)

Level of impairment: None Mild Moderate Severe Not eval.

Describe:

5. Short term/recent memory and Learning (ability to encode, store, and retrieve information)

Level of impairment: None Mild Moderate Severe Not eval.

Describe:

6. Long term memory (remember information from the past)

Level of impairment: None Mild Moderate Severe Not eval.

Describe:

7. Understanding ("receptive language"; comprehend written, spoken, or visual information)

Level of impairment: None Mild Moderate Severe Not eval.

Describe:

8. Communication ("expressive language"; express self in words, writing, signs; indicate choices)

Level of impairment: None Mild Moderate Severe Not eval.

Describe:

9. Arithmetic (understand basic quantities; make simple calculations)

Level of impairment: None Mild Moderate Severe Not eval.

Describe:

10. Verbal Reasoning (compare two choices and to reason logically about outcomes)

Level of impairment: None Mild Moderate Severe Not eval.

Describe:

11. Visual-Spatial and Visuo-Constructional Reasoning (visual-spatial perception, visual problem solving)

Level of impairment: None Mild Moderate Severe Not eval.

Describe:

12. Executive Functioning (plan for the future, demonstrate judgment, inhibit inappropriate responses)

Level of impairment: None Mild Moderate Severe Not eval.

Describe:

Emotional and Psychiatric Functioning

1. Disorganized Thinking (rambling thoughts, nonsensical, incoherent thinking)

Level of impairment: None Mild Moderate Severe Not eval.
Describe:

2. Hallucinations (seeing, hearing, smelling things that are not there)

Level of impairment: None Mild Moderate Severe Not eval.
Describe:

3. Delusions (extreme suspiciousness; believing things that are not true against reason or evidence)

Level of impairment: None Mild Moderate Severe Not eval.
Describe:

4. Anxiety (uncontrollable worry, fear, thoughts, or behaviors)

Level of impairment: None Mild Moderate Severe Not eval.
Describe:

5. Mania (very high mood, disinhibition, sleeplessness, high energy)

Level of impairment: None Mild Moderate Severe Not eval.
Describe:

6. Depressed Mood (sad or irritable mood)

Level of impairment: None Mild Moderate Severe Not eval.
Describe:

7. Insight (ability to acknowledge illness and accept help)

Level of impairment: None Mild Moderate Severe Not eval.
Describe:

8. Impulsivity (acting without considering the consequences of behavior)

Level of impairment: None Mild Moderate Severe Not eval.
Describe:

9. Noncompliance (refuses to accept help)

Level of impairment: None Mild Moderate Severe Not eval.
Describe:

Everyday Functioning

1. Independent	2. Needs Support	3. Needs Assistance	4. Total Care
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Care of Self (Activities of Daily Living (ADL's)) and related activities

Maintain adequate hygiene, including bathing, dressing, toileting, dental
Prepare meals and eat for adequate nutrition
Identify abuse or neglect and protect self from harm
Other:

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Financial (If appropriate note dollar limits)

Protect and spend small amounts of cash
Manage and use checks
Give gifts and donations
Make or modify will
Buy or sell real property
Deposit, withdraw, dispose, invest monetary assets
Establish and use credit
Pay, settle, prosecute, or contest any claim
Enter into a contract, financial commitment, or lease arrangement
Continue or participate in the operation of a business
Employ persons to advise or assist him/her
Resist exploitation, coercion, undue influence
Other:

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Medical

Give/ Withhold medical consent
Admit self to health facility
Choose and direct caregivers
Make or change an advance directive
Manage medications
Contact help if ill or in medical emergency
Other:

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Home and Community Life

Choose/establish abode
Maintain reasonably safe and clean shelter
Be left alone without danger
Drive or use public transportation
Make and communicate choices about roommates
Initiate and follow a schedule of daily and leisure activities
Travel
Establish and maintain personal relationships with friends, relatives, co-workers
Determine his or her degree of participation in religious activities
Use telephone
Use mail
Avoid environmental dangers such as stove, poisons, and obtain emergency help
Other:

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Civil or Legal

Retain legal counsel
Vote
Make decisions about legal documents
Other:

Values

1. Values about guardianship

Does the person want a guardian?

If yes, who does the person want to be guardian?

2. Preferences for how decisions are made

Does the individual prefer that decisions be made alone or with others?

3. Preferences for habitation

Where does the person want to live?

What is important in a home environment?

4. Goals and Quality of Life

What makes life good or meaningful for an individual?

What have been the individual's most valued relationships and activities?

5. Concerns, Values, Religious Views

What over-arching concerns drive decisions—e.g., concern for the well-being of family, concern for preserving finances, worries about pain, concern for maintaining privacy, desire to be near family, living as long as possible, etc.?

Are there important religious beliefs or cultural traditions?

What are the individual's strong likes, dislikes, hopes, and fears?