The CNS Vital Signs Neurocognitive Testing Report

*...is auto-scored from computerized versions of **VENERABLE NEUROPSYCHOLOGICAL TESTS**. The results measures the **MILLISECOND PRECISE SPEED** and **ACCURACY** of a patient's response. **TOTAL TESTING TIME** depends on the number of tests and rating instruments selected.*

CNS Vital Signs Report	Test Date: March 28, 2015 11:20:03
Patient ID: PatientExample	Administrator: Technician
Age: 50	Language: English (United States)

Total Test Time: 34:07 (min:secs)	CNSVS Duration: 26:16 (min:secs)	Version 4.0.86

Patient Profile:	Percentile Ra...				> 74	25 - 74	9 - 24	2 - 8	< 2
	Standard Scor...				> 109	90 - 109	80 - 89	70 - 79	< 70
Domain Scores	Subject Score	Standard Score	Percentile	VI**	Above	Average	Low Average	Low	Very Low
Neurocognition Index (NCI)	NA	78	7	Yes				X	
Composite Memory	94	93	32	Yes		X			
Verbal Memory	52	99	47	Yes		X			
Visual Memory	42	90	25	Yes		X			
Psychomotor Speed	127	69	2	Yes					X
Reaction Time*	751	87	19	Yes			X		
Complex Attention*	16	70	2	Yes		X		X	
Cognitive Flexibility	22	70	2	Yes				X	
Processing Speed	29	64	1	Yes					X
Executive Function	28	77	6	Yes				X	
Simple Visual Attention	40	107	68	Yes		X			
Motor Speed	98	84	14	Yes			X		

Domain Dashboard: Above average domain scores indicate a standard score (SS) greater than 109 or a Percentile Rank (PR) greater than 74, indicating a high functioning test subject. Average is a SS 90-109 or PR 25-74, indicating normal function. Low Average is a SS 80-89 or PR 9-24 indicating a slight deficit or impairment. Below Average is a SS 70-79 or PR 2-8, indicating a moderate level of deficit or impairment. Very Low is a SS less than 70 or a PR less than 2, indicating a deficit and impairment. Reaction times are in milliseconds. An * denotes that "lower is better", otherwise higher scores are better. Subject Scores are raw scores calculations generated from data values of the individual subtests.

VI - Validity Indicator:** Denotes a guideline for representing the possibility of an invalid test or domain score. "No" means a clinician should evaluate whether or not the test subject understood the test, put forth their best effort, or has a clinical condition requiring further evaluation..

Verbal Memory Test (VBM)	Score	Standard	Percentile	
Correct Hits - Immediate	13	104	61	The **VBM** test measures how well a subject can recognize, remember, and retrieve words e.g. exploit or attend literal representations or attribute. Subjects have to remember 15 words and recognize them in a field of 15 distractors. There are two parts to this test, Immediate and Delayed. The delayed part is presented at the end of the battery. "Correct Hits" refers to the number of target words recognized. Low scores indicate verbal memory impairment.
Correct Passes - Immediate	14	96	40	
Correct Hits - Delay	9	93	32	
Correct Passes - Delay	15	110	75	

Visual Memory Test (VIM)	Score	Standard	Percentile	
Correct Hits - Immediate	12	101	53	The **VIM** test measures how well a subject can recognize, remember, and retrieve geometric figures e.g. exploit or attend symbolic or spatial representations. Subjects have to remember 15 geometric figures, and recognize them in a field of 15 distractors. There are two parts to this test, Immediate and Delayed. The delayed part is presented at the end of the battery. "Correct Hits" refers to the number of target figures recognized. Low scores indicate visual memory impairment.
Correct Passes - Immediate	11	98	45	
Correct Hits - Delay	9	86	18	
Correct Passes - Delay	10	95	37	

Finger Tapping Test (FTT)	Score	Standard	Percentile	
Right Taps Average	50	86	18	The **FTT** is test of motor speed and fine motor control ability. There are three rounds of tapping with each hand. The FTT test measures the speed and the number of finger-taps with each hand. Low scores indicate motor slowing. Speed of manual motor activity varies with handedness. Most people are faster with their preferred hand but not always.
Left Taps Average	48	85	16	

Symbol Digit Coding (SDC)	Score	Standard	Percentile	
Correct Responses	29	64	1	The **SDC** test measures speed of processing and draws upon several cognitive processes simultaneously, such as visual scanning, visual perception, visual memory, and motor functions. Errors may be due to impulsive responding, misperception, or confusion.
Errors*	0	110	75	

Stroop Test (ST)	Score	Standard	Percentile	
Simple Reaction Time*	231	102	55	The **ST** measures reaction times, inhibition / disinhibition, mental flexibility or directed attention. The ST is a classic test of impulsivity and inhibitor control. Prolonged reaction times indicate cognitive slowing / impairment. Errors may be due to impulsive responding, misperception, or confusion.
Complex Reaction Time Correct*	542	91	27	
Stroop Reaction Time Correct*	568	87	19	
Stroop Commission Errors*	6	33	1	

Shifting Attention Test (SAT)	Score	Standard	Percentile	
Correct Responses	38	77	6	The **SAT** measures executive function or how well a subject reacts to set shifting (mental flexibility) and manages multiple tasks simultaneously. Subjects have to adjust their responses to randomly changing rules. The best scores are high correct responses, few errors and a short reaction time. Normal subjects may be slow but accurate, or fast but not so accurate. Attention deficit may be apparent.
Errors*	10	84	14	
Correct Reaction Time*	1360	77	6	

Continuous Performance Test (CPT)	Score	Standard	Percentile	
Correct Responses	40	103	58	The **CPT** measures sustained attention or vigilance and choice reaction time. Most normal subjects obtain near-perfect scores on this test. A long response time may suggest cognitive slowing and/or impairment. More than 2 errors (total) may be clinically significant. More than 4 errors (total) indicate attentional dysfunction.
Omission Errors*	0	103	58	
Commission Errors*	0	107	68	
Choice Reaction Time Correct*	491	83	13	