

Kimberley Indigenous Cognitive Assessment (KICA) Results & dementia checklist

Client name/s: _____ KICA date _____

Date of birth: _____ Assessor: _____

Address: _____

Languages: _____ Interpreter used: _____

KICA results

1. Social history: *(eg. supports, recent environmental change)*

2. Medical history:

3. Cognitive features: KICA-Cog score: **139** *(cut off 33/39 possible dementia)*

Interpretation:

4. Psychiatric & behavioural features: *(eg. depression, delusions, wandering)*

5. Daily living function: *(eg. self care, work, recreation , financial, mobility)*

6. Features of onset, progression:

7. Family history:

8. Carer concerns:

Dementia Checklist

1. **KICA-Cog score 33/39 and below.**

2. **DSM IV criteria for dementia:**

A. Memory impairment AND

B. At least one other cognitive dysfunction eg:

Dysphasia Agnosia

Dyspraxia Executive function impairment (planning, sequencing)

C. A. & B. significantly interfere with occupational/social functioning and represent a decline from previous level.

3. **Check that medical investigations have been completed:**

(rule out other possible causes of cognitive decline)

Medication review

Thyroid Function

Vision/ hearing problems

Serum toxicology- alcohol, medications

Neurological examination

B12, folate

Urinalysis

BSL

Full blood count

Syphilis serology

Serum electrolytes, calcium, creatinine, LFTs for metabolic disease including renal and liver function.

Results:

4. **Diagnosis / differential diagnoses:**

5. **Management plan:** *(client and family)*