



Danish Twins Born 1931 to 1969

OBJECTIVE MEASURES

The Danish Twin Registry 2008 - 2011

FINAL VERSION - SURVEY 201-3

FOR INTERNAL USE:

Date of Examination:

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D D M M Y Y

Interviewer Name: _____

Place of Assessment:

- Copenhagen
- Århus
- Odense
- Aalborg
- In Home Visit

PANEL 1: Informed Consent

TO BE FILLED OUT BY UNIVERSITY STAFF

0a. IP's date of birth?

D	D	M	M	Y	Y	Y	Y

0b. IP's gender?

Female

Male

1. Confirm that informed consent has been obtained:

Yes

No *Stop assessment*

2. How do you evaluate that the respondent is able to do the the following:

		Yes, without difficulty	Yes, with a little difficulty	Yes, with great difficulty	No
2a.	See?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2b.	Hear?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2c.	Understand?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2d.	Speak?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PANEL 2: Medication Inventory

3a. Does IP take any medications on a regular basis?

- Yes *Go to Q 3b*
 No *Go to Q 4*

INSTRUCTIONS:

We are interested in all medications that the respondent uses regularly, which most often means daily. However, it may be possible that the medication is used more seldom, but always for the same illness or symptoms, e.g. asthma or pains. In that case please use an average of the latest year.

3b. The list is completed with ALL medications – prescribed or over-the-counter used on a regular basis.

Medication Name	Reason for Medication	Frequency
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		

Eksempler:		
<i>Digoxin</i>	<i>Heart</i>	<i>Dayly x 2</i>
<i>Vitamin</i>	<i>Subsidy</i>	<i>Dayly x 1</i>
<i>Ventoline</i>	<i>Respiration</i>	<i>Weekly x 2</i>
<i>Ketogan</i>	<i>Migraine</i>	<i>Monthly x 2</i>

PANEL 3: Blood Pressure Measurement

INSTRUCTIONS:

Measuring is to be carried out after the respondent has been seated and resting for some minutes and before the other physical examinations are carried out. Measurements x 2 on the right upper arm with 1 minute's break in between. Choose cuff according to the circumference of the upper arm.

4. Cuff Size:

- Small (omk. 18-25,99 cm)
Regular (standard) (omk. 26-33,99 cm)
Large (omk. 34-42,99 cm)

5. Which arm was used?

- Right (standard) *Go to Q 7*
Left

6. Explain why, if the right arm was not used.

Specify: _____

7. #1 Sitting Blood Pressure:

7a. Systolic: mmHg 7c. Pulse: per min.

7b. Diastolic: mmHg

7d. Explanation for missing values: _____

PAUSE FOR 1 MINUTE

8. #2 Sitting Blood Pressure:

8a. Systolic: mmHg 8c. Pulse: per min.

8b. Diastolic: mmHg

8d. Explanation for missing values: _____

PANEL 4: Performance Measures

GRIP STRENGTH

9. This exercise tests the muscle strength in your forearms and your hands. Please squeeze the handle as hard as possible.

INSTRUCTION:

SMEDLEY'S HAND DYNAMOMETER is used for the test. Read the scale and round to the nearest whole kg. The respondent is to stand up, if possible. It is important that the upper arm is held along the body and that the elbow is bent 90 degrees. Show the respondent how to grip the handle and how to hold the dynamometer. Explain that the handle should be squeezed calmly and as hard as possible. Adjust the handle to respondent's hand. Pass the dynamometer to the respondent. The test is to be repeated three times with each hand. Squeeze, squeeze, squeeze...

Results:

9a. Right: 1. kg 2. kg 3. kg

9b. Left: 1. kg 2. kg 3. kg

9c. How was the test carried out?

Standing (standard, if possible)

Sitting

9d. The test could not be carried out on account of:

Arthritis in hand/hands

Pains in hand/hands

Cast or the like on arm/hand

Paralysis in arm/hand

The respondent did not understand the instruction

The respondent did not want to do the test

REPEATED CHAIR STAND

10. Please stand up straight as **QUICKLY** as you can five times, without stopping in between. After standing up each time, sit down and then stand up again. Keep your arms folded across your chest. - Watch me doing it correctly – show!
I'll be timing you with my stopwatch. You're not supposed to begin before I say start.

INSTRUCTIONS:

IP must sit on a normal chair with a seat height of approximately 43 cm. The feet must be in contact with the floor. The chair is placed against a wall to prevent that the chair is moved backward during the test.

Prior to start IP's pulse is counted. Start the stopwatch as IP rises the first time. Count out loud for each movement. Stop testing if IP becomes breathless or feels unwell. Also stop testing if participant uses his/her arms or if IP hasn't been able to complete all 5 maneuvers in 1 minute.

Stop the stopwatch when IP is standing up straight for the 5th time. Note the time used. Count IP's pulse immediately after – note. If pulse is irregular you must count for 1 minute.

10a. Was participant able to rise 5 times?

- Yes Go to Q 10b+c+d
No, wasn't able at all Go to Q 10e
No, had to stop after 1-4 trials
Number of completed trials: Go to Q 10e

Results of repeated chair stand test:

- 10b. Pulse, beats per minute prior to start:
- 10c. Pulse, beats per minute at the end:
- 10d. Time to complete five stands: : Sec

10e. The test had to be interrupted because:

- IP could not complete within 1 minute
IP used his/her arms
Interviewer felt unsafe
IP wasn't able to understand instructions ..
IP couldn't because physically disabled
Refused
Other reason

Specify: _____

SECTION 5: Anthropometric measurements

BODY HEIGHT

INSTRUCTIONS:

A stadiometer is used for the measurement and the respondent is measured without shoes and as outlined below. The respondent must stand erect on flat feet with his/her heels together. Heels, hips, and shoulders must be in direct contact with the surface. The head must be held in the Frankfort position (i.e. ear canal and wing of the nose must be horizontal in correlation with each other). The head must be kept as close to the wall as possible. Alternatively the respondent is placed on a firm hard surface without a carpet and with his/her back against a closed door, a wall, or other available smooth surface. Then some tape is pasted vertically on the wall corresponding to the approximate place of the top of the head. When the respondent is in place, the wooden square is placed perpendicularly to the wall and the head and the height is marked with a pencil at basis. Subsequently the distance between the floor and the mark is measured by a carpenter's ruler. The measurement is to be given in cm with one decimal place.

11a. #1st measurement: . cm

11b. #2nd measurement: . cm

11c. Reason for missing measurement: _____

Interviewer: If for some reason it is not possible to measure the height while the respondent is standing, please write 999.9

KNEE HEIGHT

INSTRUCTIONS:

IP must sit on a normal chair with a seat height of approximately 43 cm. IP must sit in a way that thigh and lower leg is in an angle of approximately 90°. IP must remove his/her right (left) shoe. The measure is taken from the floor and to the top of the knee cap with a folding ruler. The measurement must be performed two independent times. The measure is registered in cm with one decimal.

12a. #1. measurement: , cm

12b. #2. measurement: , cm

12c. **Where was the test measurement carried out?**

Right knee (standard)

Left knee

12d. Reason for missing measurement:

Can't bend any of his/her knees

Refused

Other reason for missing value

Specify: _____

BODY WEIGHT

INSTRUCTIONS:

The respondent's weight is measured without shoes and with only light clothing e.g. stockings, pants and blouse/shirt. Soehnle scales are utilized.

13a. Weight in kg: . kg

13b. Reason for missing measurement: _____

WAIST CIRCUMFERENCE

INSTRUCTIONS:

Measuring of waist circumference at hip and at waist levels. The respondent should wear only light clothing e.g. shirt or blouse. If the respondent is wearing a sweater or other heavy clothing, please ask the respondent to remove it. It is important that the respondent is standing relaxed, breathing quietly, with the arms down along the side and without tightening the stomach during the measuring. The waist circumference is measured both at the hip and at the waist (to clarify the right place you may ask the respondent to stoop lightly). The measuring tape is placed horizontally around the stomach. Please measure twice independently. The measurement is to be given in cm with one decimal place. Measurement with a Seca 200.

14a. HIP #1st measurement . cm

14b. WAIST #1st measurement . cm

14c. Was the measurement of the circumference hindered by anything – e.g. an ostomy?

Yes

Go to Q. 14d.

No

The respondent did not want to do the test .

14d. If Yes, by what: _____

SECTION 6: Cognitive tests

WORD RECALL - IMMEDIATE

15. In a moment I will read 12 words aloud to you. When I have done that I will ask you to mention as many of the words as you are able to remember.

I am only allowed to read the words one time for you – are you ready?

- COLOUR.....
- HOUSE
- RIVER
- CHICKEN
- NOSE
- GARDENER
- HAT
- SCHOOL
- FIELD
- PARENTS
- COFFEE
- BELL

Points

INSTRUCTIONS:

Give 1 point for each recalled word (the order is unimportant)

- NB!** Now I will read the words once more for you and in approx. 10 minutes you are then going to try how many of the words that you are able to remember.

DIGIT-SYMBOL SUBSTITUTION TASK

PART FOR EXERCISING

16. **INSTRUCTION:** In the following tasks you have to replace symbols with digits.

Please look at this chart (the test chart is shown). Please notice that each field has a digit at the bottom and a symbol (sign) at the top. Every digit between 1 and 9 has its own symbol.

At first an exercise (The test chart), so you can understand what the task is all about. First I will show you a few of the symbols and ask you to tell me which digit that belongs.

INSTRUCTIONS:

Please go through the first three symbols and ascertain that the respondent understands why these symbols correspond to 7, 8 and 4. If the respondent makes a mistake, please point out the correct answer to the respondent.

Correct answers to missing fields	6	3	4	2
The respondent answered correctly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
The respondent answered incorrectly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not executed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

16a.

Total points:

INSTRUCTION:

Give 1 point for each correct answer

If the respondent obtain 0 point – Go to Q. 19

PART 1:

17a. PAGE 1

On this page there are five rows of task fields. In each row there is a symbol in the top part of the field like before, whereas the bottom fields are empty. The idea is that you again have to replace the symbols with the right digit. You must begin with the first row. When you have completed this you move on to the next row at once. Do not skip any fields. The idea is to carry out the task as fast as possible. Do you have any questions before we begin?

INSTRUCTIONS:
After 45 seconds please stop the respondent. Note if there are any interruptions because of telephone calls or other disturbances.

Row A:	2	1	3	1	2	3	1	4	2	6	
Right:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Wrong:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Not done:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Point: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Row B:	7	4	6	9	2	5	8	4	7	6	
Right:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Wrong:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Not done:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Point: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Row C:	1	8	2	9	7	6	2	5	4	7	
Right:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Wrong:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Not done:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Point: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Row D:	3	7	5	1	4	9	1	5	8	7	
Right:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Wrong:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Not done:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Point: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Row E:	7	1	9	4	3	6	2	7	9	3	
Right:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Wrong:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Not done:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Point: <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Total Points (0-50):

17b. Was the exercise disturbed/interrupted?

Yes

No

If the respondent obtains only 0 point in total – Go to Q. 18

PART 2

18a. PAGE 2

I have here a sheet of paper with a completely corresponding task. Again the idea is to work fast and finish as many tasks as possible. Before we begin, I would like to know if you have any questions.

*INSTRUCTION: After 45 seconds please stop the respondent.
Note if there are any interruptions because of telephone calls or other disturbances.*

Time is up, please stop now.

Row A:	2	1	4	6	3	5	2	1	3	4	
Right:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Wrong:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Not done:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Point: <input type="checkbox"/> <input type="checkbox"/>

Row B:	3	1	2	5	1	3	1	5	4	2	
Right:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Wrong:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Not done:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Point: <input type="checkbox"/> <input type="checkbox"/>

Row C:	1	8	7	5	4	8	6	9	4	3	
Right:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Wrong:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Not done:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Point: <input type="checkbox"/> <input type="checkbox"/>

Row D:	3	6	8	5	9	4	1	6	8	9	
Right:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Wrong:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Not done:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Point: <input type="checkbox"/> <input type="checkbox"/>

Row E:	6	9	7	8	2	4	8	3	5	6	
Right:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Wrong:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Not done:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Point: <input type="checkbox"/> <input type="checkbox"/>

Total Points (0-50):

18b. Was the exercise disturbed/interrupted?

Yes

No

Go to Q. 19

DIGIT SPAN – FORWARD

19. Now I will read some digits aloud to you. When I have read them aloud I will ask you to repeat the digits for me in the same order.

INSTRUCTION:

Read the digits aloud at a speed of approx. 1 digit per second. Then let the respondent try to repeat the digits. If the respondent repeats the series of digits correctly, give 1 point. Only 1 attempt is allowed at each test. Repetitions are not allowed. The order has to be correct. Continue likewise with tests 2 -7.

Discontinue, when both tests in the same level of difficulty are incorrect.

	FORWARD ORDER	Correct	Incorrect
1a.	5-8-2	<input type="checkbox"/>	<input type="checkbox"/>
1b.	6-9-4	<input type="checkbox"/>	<input type="checkbox"/>
2a.	6-4-3-9.....	<input type="checkbox"/>	<input type="checkbox"/>
2b.	7-2-8-6	<input type="checkbox"/>	<input type="checkbox"/>
3a.	4-2-7-3-1	<input type="checkbox"/>	<input type="checkbox"/>
3b.	7-5-8-3-6	<input type="checkbox"/>	<input type="checkbox"/>
4a.	6-1-9-4-7-3	<input type="checkbox"/>	<input type="checkbox"/>
4b.	3-9-2-4-8-7	<input type="checkbox"/>	<input type="checkbox"/>
5a.	5-9-1-7-4-2-8	<input type="checkbox"/>	<input type="checkbox"/>
5b.	4-1-7-9-2-8-6	<input type="checkbox"/>	<input type="checkbox"/>
6a.	5-8-1-9-2-6-4-7	<input type="checkbox"/>	<input type="checkbox"/>
6b.	3-8-2-9-5-1-7-4	<input type="checkbox"/>	<input type="checkbox"/>
7a.	2-7-5-8-6-2-5-8-4	<input type="checkbox"/>	<input type="checkbox"/>
7b.	7-1-3-9-4-2-5-6-8	<input type="checkbox"/>	<input type="checkbox"/>

19a. Total number of correct answers ┌┐

19b. Digit span, forward length ┌

DIGIT SPAN – BACKWARDS

20. Now I will try to read some more digits aloud to you, but this time I will ask you to repeat them backwards, in the opposite order that is. If I for example say: 7-1-9, what will your answer then be?

INSTRUCTION:

If the respondent answers correctly 9-1-7, the interviewer says: "That is correct", and you continue with the tests below.

If the respondent answers incorrectly, the interviewer says: "No, I said 7-1-9, and then you should have answered 9-1-7. Now attempt the following digits: 3-4-8 and repeat them backwards.

Whether the respondent manages the second attempt or not, you now start the test below. The digits have to be repeated in the correct order backwards to obtain 1 point.

Discontinue, when both tests in a level of difficulty are incorrect.

	BACKWARD ORDER	Correct	Incorrect
1a.	2-4	<input type="checkbox"/>	<input type="checkbox"/>
1b.	5-8	<input type="checkbox"/>	<input type="checkbox"/>
2a.	6-2-9	<input type="checkbox"/>	<input type="checkbox"/>
2b.	4-1-5	<input type="checkbox"/>	<input type="checkbox"/>
3a.	3-2-7-9	<input type="checkbox"/>	<input type="checkbox"/>
3b.	4-9-6-8	<input type="checkbox"/>	<input type="checkbox"/>
4a.	1-5-2-8-6	<input type="checkbox"/>	<input type="checkbox"/>
4b.	6-1-8-4-3	<input type="checkbox"/>	<input type="checkbox"/>
5a.	5-3-9-4-1-8	<input type="checkbox"/>	<input type="checkbox"/>
5b.	7-2-4-8-5-6	<input type="checkbox"/>	<input type="checkbox"/>
6a.	8-1-2-9-3-6-5	<input type="checkbox"/>	<input type="checkbox"/>
6b.	4-7-3-9-1-2-8	<input type="checkbox"/>	<input type="checkbox"/>
7a.	9-4-3-7-6-2-5-8	<input type="checkbox"/>	<input type="checkbox"/>
7b.	7-2-8-1-9-6-5-3	<input type="checkbox"/>	<input type="checkbox"/>

20a. Total number of correct answers ┌┌

20b. Digit range, backward length ┌

CATEGORY FLUENCY – ANIMALS

- 21. In a moment I will give you a subject and ask you to mention all the words you can think of which falls into this category.**

Allow the respondent 20 seconds to show that he/she has understood what the task is all about. If necessary you may guide the respondent by saying: If the subject was "Clothing", then you could answer: shirt, tie, hat etc.

The subject is ANIMALS, I will ask you to mention as many as you can think of within 1 minute. Are you ready? Begin!

INSTRUCTIONS:

Use a stop watch. If the respondent stops for 15 seconds, the instruction may be repeated.. "are you able to mention more animals?" If the respondent asks, you may answer that animals also include e.g. birds, fish, and insects. Please note that cow, calf, heifer and bull count as four animals. The name of different races counts too. Repetitions do not count!

1.	19.	37.
2.	20.	38.
3.	21.	39.
4.	22.	40.
5.	23.	41.
6.	24.	42.
7.	25.	43.
8.	26.	44.
9.	27.	45.
10.	28.	46.
11.	29.	47.
12.	30.	48.
13.	31.	49.
14.	32.	50.
15.	33.	51.
16.	34.	52.
17.	35.	53.
18.	36.	20. Total animals: <input type="text"/>

WORD RECALL DELAYED – WITH 10 MINUTE DELAY

22. Now I will ask you to repeat as many as possible of the 12 words that I read aloud to you 10 minutes ago.

Make sure that the respondent cannot see your sheet of paper.

- COLOUR.....
- HOUSE
- RIVER
- CHICKEN
- NOSE
- GARDENER
- HAT
- SCHOOL
- FIELD
- PARENTS
- COFFEE
- BELL

Points:

INSTRUCTIONS:

Give 1 point for each recalled word (the order is unimportant)

TO THE INTERVIEWER: Evaluation of cognitive testing (Q. 13-22)

23a. Was the respondent able to carry out the cognitive tests?

Go to Q. 24

- Yes
- Yes, partially.....
- No

23b. What hindered the completion?

- Visually disabled
- Hearing disabled
- Speaking disabled
- Did not want to do the test
- Other

Specify: _____

SECTION 7: Blood testing

I would like to get your permission to take some blood tests.

INSTRUCTIONS:

1. Please verify the respondent's name and ID before you start to take blood samples.
2. Draw the the 3 (three) samples in the following order:
 - a. #1 - EDTA (purple top)
 - b. #2 - SST (yellow top)
 - c. #3 - PaxGene (red top)
3. Be aware that the PaxGene tube must be held in a vertical position BELOW participants arm to avoid back-flow of additive in the tube.
4. Mix the tubes immediately after drawing by turning the tubes carefully 6-8 times.
5. The SST tube must be left untouched for at least 30 minutes and max 45 minutes, to make the sample clot. Afterwards the tube must be centrifuged for 15 minutes at 1.000 G.

24. Do you suffer from anaemia?

Yes

No

25. Do you have any bleeding disorders?

If the answer to this question is yes it may be necessary to apply a firm pressure on the puncture site in up to 10-15 minutes

Yes

No

AFTER THE SAMPLING

26. Tubes collected:

EDTA

SST

PaxGene

Fasting glucose

26. OraGene DNA-collection = 2 mL saliva (MADT only)

Ora Gene

28. Number of attempts for blood sampling:

29. Time venipuncture ended: :
T T M M

30. Name of Phlebotomist:

31. Remarks (if any) about the blood sampling and the glucose tolerance test:

PANEL 8: Spirometri

32. Was spirometry completed?

- Yes
- No, less than 3 attempts *Gå til Sp. 36*
- No *Gå til Sp. 36*

MicroDL

33. Record results of spirometry by MicroDL/Spida

	Puff 1	Puff 2	Puff 3
PEF (L/min)	□□□□	□□□□	□□□□
FEV1 (L/sek)	□,□□□	□,□□□	□,□□□
FVC (L/sek)	□,□□□	□,□□□	□,□□□

EasyOne

34. Record results of spirometry by ndd EasyOne/OEM

	Puff 1	Puff 2	Puff 3
PEF (L/sek)	□□□,□□□	□□□,□□□	□□□,□□□
FEV1 (L/sek)	□,□□□	□,□□□	□,□□□
FVC (L/sek)	□,□□□	□,□□□	□,□□□

35. Which type was assessed as the FIRST:

- MicroDL
- EasyOne

36. Specify reason(s) why spirometry was not completed

- Impaired vision
- Impaired hearing
- Lammelse.....
- Unable to understand instructions
- Refused
- Other reason

Specify: _____

SPIROMETRY AT IN-HOME VISITS

37. Was spirometry completed?

- Yes
- No, less than 3 attempts *Go to Q 39*
- No *Go to Q 39*

38. Record results of spirometry by ndd EasyOne Diagnostic

	Liters	% Pred
FEV6	□, □□	□□□□
FEV1	□, □□	□□□□
%FEV1	0, □□	□□□□
PEF	□, □□	□□□□

39. Specify reason(s) why spirometry was not completed

- Impaired vision
- Impaired hearing
- Lammelse.....
- Unable to understand instructions
- Refused
- Other reason

Specify: _____

Thank you very much for your participation!