(From Dick, et al., J. Neurol. Neurosurg. Psychiat., 1984, 47:496)

PRINT IN BLOCK LETTERS ONLY

		AFFIXLABELHERE
WARD/CLINIC		SURNAME MED. REC. NO. SEX
CONSULTANT	R.M.O/REG.	FORE NAMES BIRTH DATE

Score one point for correct answers to each of the following questions. What is the Time? Day? Date? Month? Year? What is the name of This ward? This hospital? The district? The town? The country? REGISTRATION Name three objects (viz. car, dog, book). Score up to 3 points if, at the first attempt, the patient repeats, in order, the three objects you have randomly named. Score 2 or 1 if this is the number of objects repeated correctly. Endeavour, by further attempts and prompting, to have all three repeated, so as to test recall later. ATTENTION AND CALCULATION Ask the patient to subtract 7 from 100, and then 7 from the result- repeat this five times, scoring 1 for each time a correct subtraction is performed. RECALL Ask for the three objects repeated in the registration test, scoring 1 for each correctly recalled. LANGUAGE Score 1 point for two objects (a pencil and a watch) correctly named. Score 1 point if the following phrase is correctly repeated: "No ifs, ands or buts". Score 3 if a three-stage command is correctly executed, score 1 for each stage. For example: "With the index finger of your right hand touch the tip of your nose and then your left ear." Point below to CLOSE YOUR EYES and ask the patient to obey what is written. Score 1 point if patient closes the eyes. Ask the patient to write a sentence below. Score 1 if the sentence is sensible and has a verb and a subject.	MENTAL FUNCTION	SCORE	
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CLOSE YOUR EYES

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SCORING

MENTAL FUNCTION TEST