

Patient Information

Patient	Age	Born	Sex
Tess Turre	70	04/01/1955	Other

Assessment Information

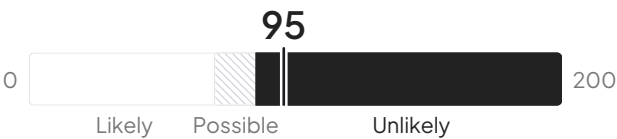
Date	Time	Ordered by	Language	Reason for testing
06/10/2025	8:07 AM UTC	Gent Jashari	English (United States)	Mental or behavioral health concern - anxiety

General Impression

Combined Score

Unlikely Cognitive Impairment

The results are within the expected range. Administering BrainCheck Assess™ every 12 months is recommended. Clinical correlation is required.



Population Percentile: 36th | Average

For more information on combined impression and scoring, see the “Glossary” section of this report.

Cognitive Domains	Impression	Population Percentile	Score
Attention Trails A	Unlikely Impairment	85th Above Average	115 / 200
Mental Flexibility Trails B	Unlikely Impairment	96th Above Average	127 / 200
Executive Function Stroop	Unlikely Impairment	46th Average	99 / 200
Processing Speed Digit Symbol Substitution	Unlikely Impairment	21st Low Average	88 / 200
Memory Immediate Recognition	Unlikely Impairment	19th Low Average	87 / 200
Memory Delayed Recognition	Unlikely Impairment	68th Average	107 / 200

WARNING: BrainCheck Assess™ is an FDA Class II Medical Device that must be prescribed and interpreted by qualified healthcare professionals. It is not a standalone diagnostic tool and does not determine the presence or absence of a clinical diagnosis.

## Assessment Details

**Immediate Recognition:** Patients with impairment may struggle with repeating themselves or asking the same question repeatedly, forgetting what they were going to do or where they placed something.

Clinical correlates to consider:

- Losing objects
- Getting lost in familiar places
- Forgetting to turn off the stove
- Medication compliance

**Delayed Recognition:** Patients with impairment may struggle with repeating themselves, forgetting the content of a conversation and relying on a calendar or alarm for reminders.

Clinical correlates to consider:

- Not knowing current events
- Forgetting appointments
- Medication compliance
- Forgetting why they went somewhere or where they are going

**Trails A:** Patients with impairment may struggle with processing speed, reaction time, paying attention, and visual scanning, having a harder time with busy environments. Lower scores strongly predict a decline in mobility

**Trails B:** Patients with impairment may struggle with navigating familiar places, driving, following a map, paying bills correctly, playing familiar games. Lower scores strongly predict a decline in mobility and the inability to drive.

**Stroop:** Patients with impairment may struggle with: following complex instructions, decision making, poor judgment, socially inappropriate behavior, apathy, withdrawal, maintaining a healthy diet.

**Digit Symbol Substitution:** Patients with impairment may struggle with paying attention for longer periods, reading, basic arithmetic.

Clinical correlates to consider:

- Depression
- Anxiety
- Poor sleep
- Substance use
- Driving

## Glossary

**General Impression:** This is a qualitative description of someone's overall performance and whether there is any concern for cognitive impairment. Sometimes, the General Impression may not match the Combined Score. In these instances, we recommend utilizing the General Impression to determine if impairment is present.

**Combined Score:** A scaled score from 0 to 200 based on performance on individual cognitive domains. The mean score of the population is 100, and the standard deviation is 15. Higher scores indicate superior performance compared to the average performance of the population. The score is scaled based on our normative database with age group and device factored in.

**Normative Database:** A data set of performance metrics from healthy people who have taken a BrainCheck examination. A person's performance is compared to those from their peers with a similar age and background.

**Impression:** Level of impairment on individual cognitive assessments is qualified as "Unlikely Impairment", "Possible Impairment", or "Likely Impairment". These impressions are based on a person's performance on the given assessment, compared to our normative database.

**Score:** Each cognitive assessment has a numerical score to indicate a user's performance. The range of the score is 0 to 200 for all assessments and is scaled based on our normative database with age group and device factored in. Screeners such as the Geriatric Depression Scale (GDS) Short Form and the General Anxiety Disorder 7 (GAD7) have different score ranges and impression indicators.

**Population Percentile:** The ranking of a test taker's overall performance derived from our database of normative data. The percentile rankings are as follow:

75th to 100th: Above Average  
25th to 74th: Average  
10th to 24th: Low Average  
2nd to 9th: Low  
Below 2nd: Very Low

**Time Out:** The Stroop and Trails A/B assessments may time out when a participant cannot complete a task in 30 seconds. Investigating the cause of a time out is recommended.

**Skipped:** Trails B is a more complex version of Trails A. It will be skipped when a test taker does not complete Trails A. Investigating the cause of a time out is recommended.

**Validity Test Failure:** A result is invalid if the performance on an assessment meets the following:

- Immediate and Delayed Recognition: Accuracy was less than 30%.
- Digit Symbol Substitution: Not enough tasks were completed.

There are several events that can cause this, for example, if a test taker was interrupted in the middle of a test or they did not fully understand the assessment. Investigating the cause of an invalid result is recommended.

Impression Key:

- Unlikely Impairment (86 to 200)
- ◆ Possible Impairment (70 to 85)
- ✕ Likely Impairment (0 to 69)

Historical Trends • Cognitive Domains

Attention • Trails A



Mental Flexibility • Trails B



Executive Function • Stroop



Processing Speed • Digit Symbol Substitution



Memory • Immediate Recognition

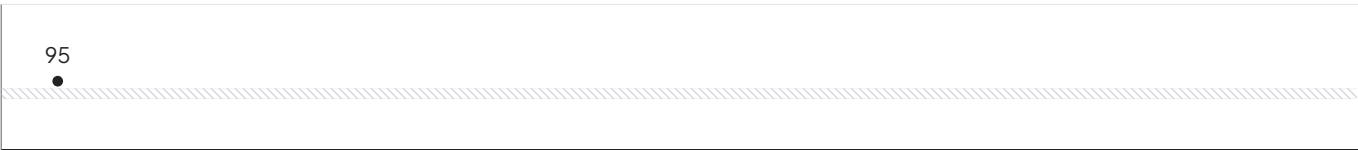


Memory • Delayed Recognition



Historical Trends • BrainCheck Standard Battery

Combined Score



06/10/2025

## Billing Documentation

### Neurocognitive Test Administration

#### Patient Information:

Tess Turre

04/01/1955

Other

This 70 year old test taker was administered a battery of neurocognitive testing on 06/10/2025.

#### Reason for Testing:

Mental or behavioral health concern - anxiety

#### Test Administration Time:

The time spent administering cognitive testing was 16 minutes including setting the patient up, creating the order, discussing cognitive testing, answering questions, administering the test / active testing time, ensuring best practices (i.e. no distractions), and uploading the results. This cognitive testing was administered by a technician.

### Neurocognitive Test Interpretation

#### Reason for Testing:

Mental or behavioral health concern - anxiety

#### Tests Administered:

Trails A, Trails B, Stroop, Digit Symbol Substitution, Immediate Recognition, Delayed Recognition

#### Test Results:

Cognitive testing was provided via a battery of cognitive assessments. The pattern of test scores indicate that results are valid.

A Clinical Report with further description of scores and results is also available.

Overall: Patient tested in the 36th percentile (scaled standard score of 95).

Trails A: Patient tested in the 85th percentile (scaled standard score of 115).

Trails B: Patient tested in the 96th percentile (scaled standard score of 127).

Stroop: Patient tested in the 46th percentile (scaled standard score of 99).

Digit Symbol Substitution: Patient tested in the 21st percentile (scaled standard score of 88).

Immediate Recognition: Patient tested in the 19th percentile (scaled standard score of 87).

Delayed Recognition: Patient tested in the 68th percentile (scaled standard score of 107).

#### Interpretation of Test Scores:

Examination of individual component tests shows:

Attention - Trails A: Unlikely Impairment

Mental Flexibility - Trails B: Unlikely Impairment

Executive Function - Stroop: Unlikely Impairment

Processing Speed - Digit Symbol Substitution: Unlikely Impairment

Memory - Immediate Recognition: Unlikely Impairment

Memory - Delayed Recognition: Unlikely Impairment

The patient's overall cognitive test performance was a standard score of 95 out of 200, which is in the 36th percentile when compared to individuals of a similar age. These results suggest the patient's presence of cognitive impairment is unlikely.

#### Test Interpretation Time:

The time spent reviewing and interpreting the cognitive testing results was 31 minutes, including integrating patient data, discussing the results with the patient, family, and or caregiver, and developing the treatment/assessment plan.