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# Using the Neurobehavioral Cognitive Status Examination as a Screening Measure for Older Adults

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We evaluated the ability of the Neurobehavioral Cognitive Status Examination (NCSE) to accurately distinguish between healthy older adults and geriatric patients suffering from dementia. Although the NCSE correctly identified all dementia patients, is produced on unacceptably high rate of false positives among the healthy elderly (70%). Despite the NCSE's lack of specificity when using the recommended classification criteria, significant group differences were found on several individual subscales and on the total number of subscales passed. These findings suggest the need to further evaluate the appropriateness of the geriatric norms for the NCSE and highlight some of the unique considerations involved in the assessment of older adults. © 1997 National Academy of Neuropsychology

Clinical neuropsychologists are poised to play a pivotal role in the care and treatment of the ever-increasing geriatric segment of the population through the process of ongoing cognitive assessment and functional evaluation. More than ever before, geriatric care facilities are regularly faced with the need to obtain neuropsychological evaluation of their residents for purposes that include differential diagnosis, placement, and an assessment of needs regarding nursing requirements and level of general care. The demand for sensitive cognitive screening measures that can be employed in an expedient, valid fashion is reinforced by the realization that the elderly are particularly susceptible to potentially reversible causes of cognitive impairment related to such etiologies as depression and a sensitivity to the effects of medication.

Several widely used screening instruments for use with older adults suffer from a lack of sensitivity and an inability to provide more than a dichotomous classification of patients as either cognitively impaired or non-impaired (Osato, Yang, & La Rue, 1993). The Neurobe-

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# Manual For The Neurobehavioral Cognitive Status Examination

Paul Marc Camic, Sara J. Knight

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## **Table of Contents Manual For The Neurobehavioral Cognitive Status Examination**

- 1. Understanding the eBook Manual For The Neurobehavioral Cognitive Status Examination
  - The Rise of Digital Reading Manual For The Neurobehavioral Cognitive Status Examination
  - Advantages of eBooks Over Traditional Books
- 2. Identifying Manual For The Neurobehavioral Cognitive Status Examination
  - Exploring Different Genres
  - Considering Fiction vs. Non-Fiction
  - Determining Your Reading Goals
- 3. Choosing the Right eBook Platform
  - Popular eBook Platforms
  - Features to Look for in an Manual For The Neurobehavioral Cognitive Status Examination
  - User-Friendly Interface
- 4. Exploring eBook Recommendations from Manual For The Neurobehavioral Cognitive Status Examination

- Personalized Recommendations
- Manual For The Neurobehavioral Cognitive Status Examination User Reviews and Ratings
- Manual For The Neurobehavioral Cognitive Status Examination and Bestseller Lists
- 5. Accessing Manual For The Neurobehavioral Cognitive Status Examination Free and Paid eBooks
  - Manual For The Neurobehavioral Cognitive Status Examination Public Domain eBooks
  - Manual For The Neurobehavioral Cognitive Status Examination eBook Subscription Services
  - Manual For The Neurobehavioral Cognitive Status Examination Budget-Friendly Options
- 6. Navigating Manual For The Neurobehavioral Cognitive Status Examination eBook Formats
  - o ePub, PDF, MOBI, and More
  - Manual For The Neurobehavioral Cognitive Status Examination Compatibility with Devices
  - Manual For The Neurobehavioral Cognitive Status Examination Enhanced eBook Features
- 7. Enhancing Your Reading Experience
  - Adjustable Fonts and Text Sizes of Manual For The Neurobehavioral Cognitive Status Examination
  - Highlighting and Note-Taking Manual For The Neurobehavioral Cognitive Status Examination
  - Interactive Elements Manual For The Neurobehavioral Cognitive Status Examination
- 8. Staying Engaged with Manual For The Neurobehavioral Cognitive Status Examination
  - Joining Online Reading Communities
  - Participating in Virtual Book Clubs
  - Following Authors and Publishers Manual For The Neurobehavioral Cognitive Status Examination
- 9. Balancing eBooks and Physical Books Manual For The Neurobehavioral Cognitive Status Examination
  - Benefits of a Digital Library
  - Creating a Diverse Reading Collection Manual For The Neurobehavioral Cognitive Status Examination
- 10. Overcoming Reading Challenges
  - Dealing with Digital Eye Strain
  - Minimizing Distractions
  - Managing Screen Time
- 11. Cultivating a Reading Routine Manual For The Neurobehavioral Cognitive Status Examination
  - Setting Reading Goals Manual For The Neurobehavioral Cognitive Status Examination
  - Carving Out Dedicated Reading Time
- 12. Sourcing Reliable Information of Manual For The Neurobehavioral Cognitive Status Examination

- Fact-Checking eBook Content of Manual For The Neurobehavioral Cognitive Status Examination
- Distinguishing Credible Sources
- 13. Promoting Lifelong Learning
  - Utilizing eBooks for Skill Development
  - Exploring Educational eBooks
- 14. Embracing eBook Trends
  - Integration of Multimedia Elements
  - Interactive and Gamified eBooks

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