Mild Behavioral Impairment Checklist (MBI-C)

| Date: | | | |
|-----------|-----------|-----------|---------|
| Rated by: | Clinician | Informant | Subject |
| Location: | Clinic | Research | |

Label

Circle "Yes" **only** if the behavior has been present for at least **<u>6 months</u>** (continuously, or on and off) and is a **<u>change</u>** from her/his longstanding pattern of behavior. Otherwise, circle "No".

Please rate severity: **1 = Mild** (noticeable, but not a significant change); **2 = Moderate** (significant, but not a dramatic change); **3 = Severe** (very marked or prominent, a dramatic change). If more than 1 item in a question, rate the most severe.

| | | NO | SEVERITY | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----|----|----------|---|---|
| This domain describes interest, motivation, and drive | | | | | |
| Has the person lost interest in friends, family, or home activities? | Yes | No | 1 | 2 | 3 |
| Does the person lack curiosity in topics that would usually have attracted her/his interest? | | No | 1 | 2 | 3 |
| Has the person become less spontaneous and active – for example, is she/he less likely to initiate or maintain conversation? | | No | 1 | 2 | 3 |
| Has the person lost the motivation to act on their obligations or interests? | | No | 1 | 2 | 3 |
| Is the person less affectionate and/or lacking in emotions when compared to her/his usual self? | | No | 1 | 2 | 3 |
| Does she/he no longer care about anything? | Yes | No | 1 | 2 | 3 |
| This domain describes mood or anxiety symptoms | | | | | |
| Has the person developed sadness or appear to be in low spirits? Does she/she have episodes of tearfulness? | Yes | No | 1 | 2 | 3 |
| Has the person become less able to experience pleasure? | Yes | No | 1 | 2 | 3 |
| Has the person become discouraged about their future or feel that she/he is a failure? | | No | 1 | 2 | 3 |
| Does the person view herself/himself as a burden to family? | | No | 1 | 2 | 3 |
| Has the person become more anxious or worried about things that are routine (e.g. events, visits, etc.)? | | No | 1 | 2 | 3 |
| Does the person feel very tense, having developed an inability to relax, or shakiness, or symptoms of panic? | Yes | No | 1 | 2 | 3 |
| This domain describes the ability to delay gratification and control | | | | | |
| behavior, impulses, oral intake and/or changes in reward | | | | | |
| Has the person become agitated, aggressive, irritable, or temperamental? | Yes | No | 1 | 2 | 3 |
| Has she/he become unreasonably or uncharacteristically argumentative? | Yes | No | 1 | 2 | 3 |
| Has the person become more impulsive, seeming to act without considering things? | Yes | No | 1 | 2 | 3 |
| Does the person display sexually disinhibited or intrusive behaviour, such as touching (themselves/others), hugging, groping, etc., in a manner that is out of character or may cause offence? | Yes | No | 1 | 2 | 3 |

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For more information contact Zahinoor Ismail MD email: MBIchecklist@gmail.com

| Has the person become more easily frustrated or impatient? Does she/he | Yes | No | 1 | 2 | 3 |
|-------------------------------------------------------------------------------|--------|------|---|---|---|
| have troubles coping with delays, or waiting for events or for their turn? | | | | | |
| Does the person display a new recklessness or lack of judgement when | Yes | No | 1 | 2 | 3 |
| driving (e.g. speeding, erratic swerving, abrupt lane changes, etc.)? | | | | | |
| Has the person become more stubborn or rigid, i.e., uncharacteristically | Yes | No | 1 | 2 | 3 |
| insistent on having their way, or unwilling/unable to see/hear other views? | | | | | |
| Is there a change in eating behaviors (e.g., overeating, cramming the | | | | | |
| mouth, insistent on eating only specific foods, or eating the food in exactly | Yes | No | 1 | 2 | 3 |
| the same order)? | | | | | |
| Does the person no longer find food tasteful or enjoyable? Are they eating | | No | 1 | 2 | 3 |
| less? | Yes | | | - | Ũ |
| Does the person hoard objects when she/he did not do so before? | Yes | No | 1 | 2 | 3 |
| Has the person developed simple repetitive behaviors or compulsions? | Yes | No | 1 | 2 | 3 |
| Has the person recently developed trouble regulating smoking, alcohol, | Yes | No | 1 | 2 | 3 |
| drug intake or gambling, or started shoplifting? | | INO | | Ζ | 3 |
| This domain describes following societal norms and having social | | | | | |
| graces, tact, and empathy | | | | | |
| Has the person become less concerned about how her/his words or | Vaa | No | 1 | 2 | 3 |
| actions affect others? Has she/he become insensitive to others' feelings? | Yes | No | I | 2 | 3 |
| Has the person started talking openly about very personal or private | Vaa | Na | 4 | 0 | 3 |
| matters not usually discussed in public? | Yes | No | 1 | 2 | 3 |
| Does the person say rude or crude things or make lewd sexual remarks | Vee | NIa | 4 | 0 | 2 |
| that she/he would not have said before? | Yes | No | 1 | 2 | 3 |
| Does the person seem to lack the social judgement she/he previously had | | NIa | 4 | 0 | 2 |
| about what to say or how to behave in public or private? | Yes | No | 1 | 2 | 3 |
| oes the person now talk to strangers as if familiar, or intrude on their | | N | | ~ | 0 |
| activities? | | No | 1 | 2 | 3 |
| This domain describes strongly held beliefs and sensory | | | | | |
| experiences | | | | | |
| Has the person developed beliefs that they are in danger, or that others | Vaa | Na | 4 | 2 | 2 |
| are planning to harm them or steal their belongings? | Yes No | | 1 | 2 | 3 |
| Has the person developed suspiciousness about the intentions or motives | Yes | Na | 4 | 2 | 2 |
| of other people? | | No | 1 | 2 | 3 |
| Does she/he have unrealistic beliefs about her/his power, wealth or skills? | | No | 1 | 2 | 3 |
| Does the person describe hearing voices or does she/he talk to imaginary | Yes | NI - | 4 | ~ | 2 |
| people or "spirits"? | | No | 1 | 2 | 3 |
| Does the person report or complain about, or act as if seeing things (e.g. | | | | | |
| people, animals or insects) that are not there, i.e., that are imaginary to | Yes | No | 1 | 2 | 3 |
| others? | | | | | |
| | J | | | | |

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