

Rancho Levels of Cognitive Functioning - Revised

Patient Name: _____ Diagnosis: _____

MR#: _____ Date of Onset: _____

Level of Function	Behavioral Characteristics	Examiners					
		Assessment Dates					
Level 1 No Response Total Assistance	• Complete absence of observable change in behavior when presented visual, auditory, tactile, proprioceptive, vestibular or painful stimuli.						
Level 2 Generalized Response Total Assistance	• Demonstrates generalized reflex response to painful stimuli.						
	• Responds to repeated auditory stimuli with increased or decreased activity.						
	• Responds to external stimuli with physiological changes generalized, gross body movement and /or not purposeful vocalization.						
	Responses noted above may be same regardless of type and location of stimulation.						
	Responses may be significantly delayed.						
Level 3 Localized Response Total Assistance	Demonstrates withdrawal or vocalization to painful stimuli.						
	• Turns toward or away from auditory stimuli.						
	• Blinks when strong light crosses visual field.						
	• Follows moving object passed within visual field.						
	• Responds to discomfort by pulling tubes or restraints.						
	• Responds inconsistently to simple commands.						
	• Responses directly related to type of stimulus.						
	• May respond to some persons (especially family and friends) but not to others.						

Level of Function	Behavioral Characteristics	Examiners							
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Level 4 Confused-Agitated Maximal Assistance	• Alert and in heightened state of activity								
	• Purposeful attempts to remove restraints or tubes or crawl out of bed.								
	• May perform motor activities such as sitting, reaching and walking but without any apparent purpose or upon another's request.								
	• Very brief and usually non purposeful moments of sustained alternatives and divided attention.								
	• Absent short-term memory.								
	• Absent goal directed, problem solving, self-monitoring behavior.								
	• May cry out or scream out of proportion to stimulus even after its removal.								
	• May exhibit aggressive or flight behavior.								
	Mood may swing from euphoric to hostile with no apparent relationship to environmental events.								
	• Unable to cooperate with treatment efforts.								
Level 5 Confused - Inappropriate - Non-Agitated Maximal Assistance	• Verbalizations are frequently incoherent and/or inappropriate to activity or environment.								
	• Alert, not agitated but may wander randomly or with a vague intention of going home.								
	• May become agitated in response to external stimulation and/or lack of environmental structure.								
	• Not oriented to person, place or time.								
	• Frequent brief periods, non-purposeful sustained attention.								
	• Severely impaired recent memory, with confusion of past and present in reaction to ongoing activity.								
	• Absent goal directed, problem solving, self-monitoring behavior								

Level of Function	Behavioral Characteristics	Examiners						
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Level 5 Continued	• Often demonstrates inappropriate use of objects without external direction.							
	• May be able to perform previously learned tasks when structure and cues provided.							
	• Unable to learn new information.							
	• Able to respond appropriately to simple commands fairly consistently with external structures and cues.							
	• Responses to simple commands without external structure are random and non-purposeful in relation to the command.							
	• Able to converse on a social, automatic level for brief periods of time when provided external structure and cues.							
	• Verbalizations about present events become inappropriate and confabulatory when external structure and cues are not provided.							
Level 6 Confused-Appropriate Moderate Assistance	• Inconsistently oriented to person, and place							
	• Able to attend to highly familiar tasks in non-distracting environment for 30 minutes with moderate redirection.							
	• Remote memory has more depth and detail than recent memory.							
	• Vague recognition of some staff.							
	• Able to use assistive memory aide with Max assist.							
	• Emerging awareness of appropriate response to self, family and basic needs.							
	• Emerging goal directed behavior related to meeting basic personal needs.							
	• Moderate assist to problem solve barriers to task completion.							
	• Supervised for old learning (e.g. self care)							
	• Shows carry over for relearned familiar tasks (e.g. self care)							

Level of Function	Behavioral Characteristics	Examiners						
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Level 6 Continued	• Max assist for new learning with little or no carry over.							
	• Unaware of impairments, disabilities and safety risks.							
	• Consistently follows simple directions.							
	• Verbal expressions are appropriate in highly familiar and structured situations							
Level 7 Automatic - Appropriate Minimal Assistance For Routine Daily Living Skills	• Consistently oriented to person and place, within highly familiar environments. Mod. assist for orientation to time.							
	• Able to attend to highly familiar tasks in a non-distraction environment for a least 30 minutes with minimal assist to complete tasks.							
	• Able to use assistive memory devices with Minimal assistance.							
	• Minimal supervision for new learning.							
	• Demonstrates carry over of new learning.							
	• Initiates and carries out steps to complete familiar personal and household routine but has shallow recall of what he/she has been doing.							
	• Able to monitor accuracy and completeness of each step in routine personal and household ADLs and modify plan with minimum assistance.							
	• Superficial awareness of his/her condition but unaware of specific impairments and disabilities and the limits they place on his/her ability to safely, accurately and completely carry out his/her household, community, work and leisure ADLs.							
	• Minimal supervision for safety in routine home and community activities.							
	• Unrealistic planning for the future.							
	• Unable to think about consequences of a decision or action.							
	• Overestimate abilities.							

Level of Function	Behavioral Characteristics	Examiners							
		Assessment Dates							
Level 7 Continued	• Unaware of others' needs and feelings.								
	• Oppositional/uncooperative								
	• Unable to recognize inappropriate social interaction behavior.								
Level 8 Purposeful and Appropriate Stand-by Assistance	• Consistently oriented to person, place and time.								
	• Independently attends to and completes familiar tasks for 1 hour in a distracting environment.								
	• Able to recall and integrate past and recent events.								
	• Uses assistive memory devices to recall daily schedule, "to do" lists and record critical information for later use with stand-by assistance.								
	• Initiates and carries out steps to complete familiar personal, household, community, work and leisure routines with stand-by assistance and can modify the plan when needed with minimal assistance.								
	• Requires no assistance once new tasks/activities are learned.								
	• Aware of and acknowledges impairments and disabilities when they interfere with task completion but requires stand-by assistance to take appropriate corrective action.								
	• Thinks about consequences of a decision or action with minimal assistance.								
	• Overestimates or underestimates abilities.								
	• Acknowledges others' needs and feelings and responds appropriately with minimal assistance.								
	• Depressed.								
	• Irritable.								
	• Low frustration tolerance/easily angered.								
	• Argumentative.								

Level of Function	Behavioral Characteristics	Examiners						
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Level 8 Continued	<ul style="list-style-type: none"> Self centered. 							
	<ul style="list-style-type: none"> Uncharacteristically dependent/independent. 							
	<ul style="list-style-type: none"> Able to recognize and acknowledge inappropriate social interaction behavior while it is occurring and takes corrective action with minimal assistance. 							
Level 9 Purposeful and Appropriate Stand-by Assistance on Request	<ul style="list-style-type: none"> Independently shifts back and forth between tasks and completes them accurately for at least two consecutive hours. 							
	<ul style="list-style-type: none"> Uses assistive memory devices to recall daily schedule, "to do" lists and record critical information for later use with assistance when requested. 							
	<ul style="list-style-type: none"> Initiates and carries out steps to complete familiar personal, household, work and leisure tasks independently and unfamiliar personal, household, work and leisure tasks with assistance when requested. 							
	<ul style="list-style-type: none"> Aware of and acknowledges impairments and disabilities when they interfere with task completion and takes appropriate corrective action but requires stand-by assist to anticipate a problem before it occurs and take action to avoid it. 							
	<ul style="list-style-type: none"> Able to think about consequences of decisions or actions with assistance when requested. 							
	<ul style="list-style-type: none"> Accurately estimates abilities but requires stand-by assistance to adjust to task demands. 							
	<ul style="list-style-type: none"> Acknowledges others' needs and feelings and responds appropriately with stand-by assistance. 							
	<ul style="list-style-type: none"> Depression may continue. 							
	<ul style="list-style-type: none"> May be easily irritable. 							
	<ul style="list-style-type: none"> May have low frustration tolerance. 							
	<ul style="list-style-type: none"> Able to self monitor appropriateness of social interaction behavior with stand-by 							

Level of Function	Behavioral Characteristics	Examiners						
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Level 10 Purposeful and Appropriate Modified Independent	<ul style="list-style-type: none"> • Able to handle multiple tasks simultaneously in all environments but may require periodic breaks. 							
	<ul style="list-style-type: none"> • Able to independently procure, create and maintain own assistive memory devices. 							
	<ul style="list-style-type: none"> • Independently initiates and carries out steps to complete familiar and unfamiliar personal, household, community, work and leisure tasks but may require more than the usual amount of time and/or compensatory strategies to complete them. 							
	<ul style="list-style-type: none"> • Anticipates impact of impairments and disabilities on ability to complete daily living tasks and takes action to avoid problems before they occur but may require more than the usual amount of time and/or compensatory strategies. 							
	<ul style="list-style-type: none"> • Able to independently think about consequences of decisions or action but may require more than the usual amount of time and/or compensatory strategies to select the appropriate decision or action. 							
	<ul style="list-style-type: none"> • Accurately estimates abilities and independently adjusts to task demands. 							
	<ul style="list-style-type: none"> • Able to recognize the needs and feelings of others and automatically respond in appropriate manner. 							
	<ul style="list-style-type: none"> • Periodic periods of depression may occur. 							
	<ul style="list-style-type: none"> • Irritability and low frustration tolerance when sick, fatigued and /or under emotional stress. 							
	<ul style="list-style-type: none"> • Social interaction behavior is consistently appropriate. 							

Galveston Orientation and Amnesia Test (GOAT)

Make sure patient cannot see a calendar/clock or look at his/her watch. Do not allow friends/relatives to coach. Record all answers verbatim.

Current time: _____:_____ AM / PM

Day of the Week: Su M T W Th F Sa

Error pts.

1. What is your name? (2) _____ When were you born? (4) _____

Where do you live? (4) _____

2. Where are you now? (5) City _____ (5) Hospital _____
(unnecessary to state name of hospital)

3. On what date were you admitted to this hospital? (5) _____

How did you get here? (5) _____

4. What is the first event you can remember after the injury? (5) _____

Can you describe in detail (e.g., date, time, companions) the first event you can recall after the injury? (5)

5. Can you describe the last event you recall before the accident? (5) _____

Can you describe in detail (e.g., date, time, companions) the first event you can recall before the injury? (5)

6. What time is it now? (-1 for each 1/2 hour removed from the correct time to maximum of -5) _____

7. What day of the week is it? (-1 for each day removed from correct one to maximum -3) _____

8. What day of the month is it? (-1 for each day removed from correct one to a maximum of -5) _____

9. What is the month? (-5 for each month removed from correct one to maximum of -15) _____

10. What is the year? (-10 for each year removed from correct one to maximum of -30) _____

Total error points _____

Total GOAT score (100 - total error points) _____