

## **Clock Drawing Test**

This test provides a quick screening test for cognitive dysfunction (frontal and temporoparietal functioning) secondary to dementia, delirium, or a range of neurological and psychiatric illnesses. It is a component of the mini-cog assessment, also serving the function of distracter for the three-word recall.

	Clock Drawing Test				
Link to Tool	http://www.sagelink.ca/sites/default/files/uploads/tools/ClockDrawingTest.pdf				
Time to Administer	1 - 2 minutes				
Туре	Standardized screening instrument.				
Setting	A variety of settings including primary care, acute care, community, outpatient/ rehab, and long- term care. It is particularly useful in general practice.				
Administration	<ol> <li>Provide individual with a piece of paper with a pre-drawn circle of approximately 10 cm in diameter.</li> <li>Indicate that the circle represents the face of a clock and ask the individual to put in the numbers so that it looks like a clock</li> <li>Ask the individual to add arms so that the clock indicates the time "ten minutes after eleven"</li> <li>These instructions can be repeated but no additional instructions should be given. Give the individual as much time as needed to complete the task.</li> </ol>				
Interpretation	NORMAL		ABNORMAL		
	11 12 1 10 2 10 2 10 2 10 2 10 2 10 2 10	Mild	Moderate	Severe	
	Mild irregularities of number placement are acceptable as normal	Commonly, early dementia is associated with drawing hands towards the 11 and 10; this perseveration towards 10 is an example of problems with executive function	Abnormalities of number and hand placement ent with abnormal clock of	Severe abnormalities	

	The CDT is considered normal if all numbers are present in the correct sequence and position, and the hands display the requested time with one shorter and one longer hand. There is some variation in scoring methodology.			
	Clock errors may be divided into categories including visuo-spatial, perseveration, and gross disorganization. Common errors in Alzheimer's disease include perseveration, counter- clockwise numbering, absence of numbers and irrelevant spatial arrangement. Errors following stroke may reflect spatial neglect, hemianopsia and sensory loss, in addition to errors suggestive of cognitive dysfunction. A variety of psychiatric conditions such as depression and schizophrenia contribute potentially to abnormal clock-drawing.			
Reference	<ul> <li>Borson, S, Scanlan, J., Brush, M., Vitaliano, P., Dokmak, A., The mini-cog: a cognitive "vital signs" measure for dementia screening in multi-lingual elderly. <i>Int J Geriatric Psychiatry</i> 2000; 15 (11): 1021-1027.</li> <li>Siu, AL. Screening for dementia and investigating its causes. <i>Ann Intern Med</i> 1991; 115: 122-132.</li> </ul>			

	Clock Drawing	
Individual's Name:		
Date:		