The University of Iowa College of Nursing Family Involvement in Care Research

KNOWLEDGE OF ALZHEIMER'S TEST (KAT) *Key (Correct answer in bold)*

I.D.#		Date:	
	(Col. 4-8)		(Col. 10-13)

<u>Directions</u>: Circle \underline{T} if the statement is true or \underline{F} if the statement is false.

		CIRCLE ONE		
1.	Memory loss is part of the normal aging process.	T	F	(15)
2.	Alzheimer's is a disease which progresses at an individual rate.	T	F	(16)
3.	Low stimulation is important to the individual with advanced Alzheimer's disease.	T	F	(17)
4.	The only loss produced by Alzheimer's disease is a progressive decline in memory.	Т	F	(18)
5.	In the care setting, restraints are the best way to manage a demented patient who wanders.	T	F	(19)
6.	When a person with Alzheimer's disease shows signs of increasing confusion or stress, isolation is sometimes an appropriate management technique.	T	F	(20)
7.	Repeatedly asking questions is a symptom of the memory loss of Alzheimer's disease.	T	F	(21)
8.	The family with an Alzheimer's disease victim is often in a state of chronic grief.	T	F	(22)
9.	The T. V. is a good distracter for the patient with Alzheimer's disease.	Т	F	(23)
10.	When a patient with Alzheimer's disease becomes accusatory, it is best to deny the accusation and remind the person of his disease process.	T	F	(24)
11.	Non-verbal cues are not important to the Alzheimer's disease patients because they depend more on communication content to assist function.	Т	F	(25)

		CIRCLE ONE		
12.	Environmental control is a prime intervention with persons with Alzheimer's disease.	T	F	(26)
13.	Individuals with Alzheimer's disease have a tendency to become more dependent on significant others.	T	F	(27)
14.	Maintaining a routine is important to the person with Alzheimer's disease.	T	F	(28)
15.	The family is an important source of information regarding pre-admission behaviors of the patient with Alzheimer's disease.	T	F	(29)
16.	Making the care setting more meaningful with family pictures is helpful to the victim of Alzheimer's disease.	T	F	(30)
17.	Physical exercise should be avoided by the person with Alzheimer's disease because it increases the person's stress level.	T	F	(31)
18.	Rest periods should not be planned for the patient with Alzheimer's disease in order to assure sleeping throughout the night.	T	F	(32)
19.	Generally, the cause for disruptive behaviors in the patient with Alzheimer's disease is the loss of ability to cope with stress.	T	F	(33)
20.	The patient with advanced Alzheimer's disease has insight into their behaviors.	T	${f F}$	(34)
21.	The cerebral cortex is the area of the brain where pathological changes are most often found with Alzheimer's disease.	Т	F	(35)
22.	Alzheimer's disease is easily diagnosed with laboratory tests and X-ray.	T	F	(36)
23.	There is research evidence that large amounts of Lecithin or other Choline sources used early in the disease process are beneficial in treating Alzheimer's patients.	Т	F	(37)
24.	Radios and TVs are usually good ways to keep Alzheimer's patients in touch with the world.	T	${f F}$	(38)

		CIRCLE ONE		
25.	Alzheimer's patients should stay in bed all night so that they can get their sleep.	T	F	(39)
26.	Alzheimer's patients are often not able to learn anymore because of their brain damage.	T	F	(40)
27.	Nutritional requirements for Alzheimer's patients are the same as for others of the same age and amount of activity.	T	F	(41)
28.	A possible explanation for Alzheimer's patients repetitive requests for food may be impairment in the normal appetite control center.	T	F	(42)
29.	Alzheimer's patients who step high over cracks or lines in the floor have a muscle control disturbance.	T	F	(43)
30.	There is always a continual decrease in sex drive from the early to the last stage of Alzheimer's disease.	T	F	(44)
31.	The loss of ability to recognize urge to defecate and/or urinate can be a reason for Alzheimer's patients' incontinence.	T	F	(45)
32.	Most drugs used to treat persons with Alzheimer's disease are used to increase the patient's comfort rather than to cure the disease.	T	F	(46)
33.	Chemical abnormalities in Alzheimer's disease are comparable in some ways to those in Parkinson's disease.	T	F	(47)