

**Mini-Cog
Assessment
Instrument for
Dementia**

Another brief screen for cognitive impairment is the Mini-Cog. It takes approximately 3 minutes to administer. It has minimal language content, which reduces cultural and educational bias. The Mini-Cog combines a 3-item recall component with a Clock Drawing Test (CDT).

Administration

Note: A clock should not be within the patient's view when administering this test.

1. Make sure you have the patient's attention. Instruct the patient to listen carefully to and remember 3 unrelated words and then to repeat the words back to you, so you will know they heard the words correctly.
2. Instruct the patient to draw the face of a clock, either on a blank sheet of paper or on a sheet with the clock circle already drawn on it. After the patient puts the numbers on the clock face, ask him or her to draw the hands of the clock to read a specific time (11:10 or 8:20 are most commonly used and are more sensitive than some others).

These steps can be repeated, but no additional instructions should be given. If the patient cannot complete the CDT within 3 minutes, move on to the next step.

3. Ask the patient to repeat the 3 previously presented words (See step 1).

Scoring

Recall

A score of 0 to 3 is given for the recall test. A point is given for each recalled word after the CDT distracter.

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continued**

Scoring

Clock Drawing Test (CDT)

A score of 0 or 2 is given for the CDT test. Two points are given for a normal CDT. No points are given for an abnormal CDT. For a normal CDT, all numbers must be depicted, in the correct sequence and position, and the hands must readably display the requested time.

Mini-Cog Score

To obtain the mini-cog score, add the recall and CDT scores
0-2 indicates positive screen for dementia.
3-5 indicates negative screen for dementia.

References: Borson S, Scanlan JM, Brush M, et al. The Mini-Cog: a cognitive “vital signs” measure for dementia screening in multi-lingual elderly. *Int J Geriatr Psychiatry* 2000; 15(11):1021-27; Borson S, Scanlan JM, Chen P, et al. The Mini-Cog as a screen for dementia: validation in a population-based sample. *J Am Geriatr Soc* 2003; 51(10):1451-4; Borson S, Scanlan JM, Wantanabe J, et al. Improving identification of cognitive impairment in primary care. *Int J Geriatr Psychiatry* 2006; 21(4):349-55.

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