

COGNITIVE-DEVELOPMENTAL DATA CODING SHEET (NRC03b)

Participant Age: ≥ 30 months and < 4 years

CKiD Chronic Kidney Disease in Children Cohort Study

SECTION A: GENERAL INFORMATION

A1. PARTICIPANT ID: ENTER NUMBER ONLY IF LABEL IS NOT AVAILABLE

|_| - |_|_| - |_|_|_|

A2. CKiD VISIT #: _____

A3. FORM VERSION: 0 1 / 1 5 / 1 3

A4. TESTING DATE: _____ / _____ / _____
M M D D Y Y Y Y

SECTION B

B1. Is the child ≥ 30 months and < 4 years?

Yes..... 1

No (END)..... 2 (END)

B2. Number of Sessions: _____

Refer to the Reliability Recording Worksheet when completing EACH SECTION. Document the “Reliability Code” on the Reliability Recording Worksheet and then transcribe the reliability code to the Cognitive-Development Coding Sheet.

Please note: A reliability code should be entered for each scale even if the scale is not administered. If a scale is not administered, record -9 for the scale variables and enter the appropriate reliability code explaining why the scale was not completed.

Initials of Licensed Psychologist _____



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For data entry personnel only: For scales not completed, record -9 for the scale variables, and enter “Not performed” in the notes field. Enter the reliability code for the scale as it is recorded on the form.

SECTION C removed

**Section D: Wechsler Preschool and Primary Scale of Intelligence, Third Edition (WPPSI-III)
(2:6-3:11)**

D0. WPPSI-III

a. Was the WPPSI-III completed at the study visit?

Yes (**Skip to D1**)..... 1 (**Skip to D1**)

No..... 2

b. Please explain why the WPPSI-III was not completed using Primary Reliability Codes 2-8 and the appropriate Secondary Reliability Code:

Reliability Code: _____ . _____ (**END**)

SECTION D: RECEPTIVE VOCABULARY

D1. Raw Score: _____

D2. Scaled Score: _____

D3. Reliability Code: _____ . _____

SECTION E: BLOCK DESIGN

E1. Raw Score: _____

E2. Scaled Score: _____

E3. Reliability Code: _____ . _____

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SECTION F: INFORMATION

F1. Raw Score: _____
F2. Scaled Score: _____
F3. Reliability Code: _____ . _____

SECTION G: OBJECT ASSEMBLY

G1. Raw Score: _____
G2. Scaled Score: _____
G3. Reliability Code: _____ . _____

SECTION H: IQ MEASUREMENTS

H1. Verbal IQ: _____
 a. Percentile Score: _____ . _____ %
H2. Performance IQ: _____
 a. Percentile Score: _____ . _____ %
H3. Full Scale IQ: _____
 a. Percentile Score: _____ . _____ %

TO BE COMPLETED BY THE PERSON COMPLETING THE FORM:

Date form completed: ____ / ____ / ____ Initials: ____
 M M D D Y Y Y Y

PROMPT: PLEASE SEND PARENT AND NEPHROLOGIST FEEDBACK REPORTS. SAMPLE REPORTS CAN BE FOUND AT THE BACK OF CHAPTER 13 IN THE CKID MANUAL OF PROCEDURES.

Initials of Licensed Psychologist _____