

STROOP SUBTEST 1

PID:

Acrostic:

Visit:

Date Form Completed:

Administration Type:

- (0)
- (1) Self-administered
- (2) Mailed
- (3) Telephone
- (4) Interviewer-administered
- (5) Home
- (6) Administered to Proxy

Administered by:

Language:

- (1) English
- (2) Spanish
- (3) Navajo

Number of errors: {errors} {int 4}

Number correct: {correct} {int 4}

Time to complete test (maximum 2 minutes - 120 seconds):

Stopwatch reading: {minscomp} {int 4} : {secscomp} {int 4}

Total time converted to seconds: {total_sec} {int 4}

Stroop Subtest 1 given? {given} {int 4}

- (0) --
- (1) 1 - Yes
- (2) 2 - No

If 'No', select reason: {reason} {int 4}

- (0) --
- (1) 1 - Physical
- (2) 2 - Uncooperative/refused
- (3) 3 - Can't Read
- (4) 4 - Other (specify)

If reason is 'Physical', select:

{vision} {int 4} **Vision** {hearing} {int 4} **Hearing** **Other** {physothspsy} {varchar 500}

If not given for other reason: {other} {varchar 500}

STROOP SUBTEST 2

PID:

Acrostic:

Visit:

Date Form Completed:

Administration Type:
(0)
(1) Self-administered
(2) Mailed
(3) Telephone
(4) Interviewer-administered
(5) Home
(6) Administered to Proxy

Administered by:

Language:
(1) English
(2) Spanish
(3) Navajo

Number of errors: {errors} {int 4}

Number correct: {correct} {int 4}

Time to complete test (maximum 2 minutes -120 seconds):

Stopwatch reading: {minscomp} {int 4} : {secscomp} {int 4}

Total time converted to seconds: {total_sec} {int 4}

Stroop Subtest 2 given? {given} {int 4}
(0) --
(1) 1 - Yes
(2) 2 - No

If 'No', select reason: {reason} {int 4}
(0) --
(1) 1 - Physical
(2) 2 - Uncooperative/refused
(3) 3 - Can't Read
(4) 4 - Other (specify)

If reason is 'Physical', select:

{vision} {int 4} **Vision** {hearing} {int 4} **Hearing** {physother} {int 4} **Other** {physothspfy}
{varchar 200}

If not given for other reason: {other} {varchar 200}

STROOP SUBTEST 3

PID:

Acrostic:

Visit:

Date Form Completed:

Administration Type:
(0)
(1) Self-administered
(2) Mailed
(3) Telephone
(4) Interviewer-administered
(5) Home
(6) Administered to Proxy

Administered by:

Language:
(1) English
(2) Spanish
(3) Navajo

Number of errors: {errors} {int 4}

Number correct: {correct} {int 4}

Time to complete test (maximum 3 minutes - 180 seconds):

Stopwatch reading {minscomp} {int 4} : {secscomp} {int 4}

Total time converted to seconds {total_sec} {int 4}

Stroop Subtest 3 given? {given} {int 4}
(0) --
(1) 1 - Yes
(2) 2 - No

If 'No', select reason: give reason {reason} {int 4}
(0) --
(1) 1 - Physical
(2) 2 - Uncooperative/refused
(3) 3 - Can't Read
(4) 4 - Other (specify)

If reason is 'Physical', select:

{vision} {int 4} **Vision** {hearing} {int 4} **Hearing** {physother} {int 4} **Other** {physothspfy} {varchar 200}

If not given for other reason: {other} {varchar 200}

Stroop Subtest 1

Patient ID	<input type="text" value="[affix ID label here]"/>	Date Form Completed	<input type="text" value=""/> /	<input type="text" value=""/> /	<input type="text" value=""/>
			Month	Day	Year
Administration Type	<input type="text"/>	Visit Code	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Reviewed by	<input type="text"/>	<input type="text"/>	Language <input type="text" value="E"/>

Administration:

Time allowed for Stroop Subtest 1 = 2 minutes (120 seconds)

If participant does not understand directions on Subtest 1 of Stroop, technician may repeat up to two times. If participant still does not understand instructions, technician should move on to Subtest 2. Participant is allowed to hold the paper by the edges but is not allowed to point to the items.

After the test begins, should the participant start over or stop suddenly, DO NOT stop the stopwatch. Just say, "**Please continue.**" (If participant says a color in error and self-corrects, continue with test and do not count a self-correction as an error.)

Practice:

Note: If participant cannot read the practice items as requested, skip to Stroop Subtest #2.

Hand the participant the test and say "**You may hold this sheet firmly by the edges or you may lay it flat on the table. You are not allowed to point to the items. Please read the names of the first three colors presented on this sheet as fast as possible. Read them left to right.**" (While giving instructions, show the sheet to the participant and run your finger from left to right in the first row. Correct participant response is: blue, blue, yellow.)

If it is done incorrectly, repeat the instructions and ask the participant to try again up to two times.

Test:

"When I tell you to begin, start at the beginning of the first line and please read the names of all the colors presented on the sheet as fast as possible. Again, do it line by line left to right." (While giving instructions, show the sheet to the participant and run your finger from left to right in the first row, then the second row, and then the third row.) **"Go ahead."**

Scoring:

Start the stopwatch as soon as the participant starts to read/name colors.

Record:

- 1) The time it takes to go through Subtest 1
- 2) Number of errors in Subtest 1 (circle the E for error below the color). Note: the participant is allowed to self-correct and self-corrections are not counted as errors.
- 3) Number correct in Subtest 1.
- 4) If participant exceeds two-minute time limit, place an "X" in the box after the last correct response.

Discontinuation rule: Attempt all three subtests with every participant. For those participants who attempt the test and understand the time limits (2 minutes for subtest 1 and 2, 3 minutes for subtest 3) determine whether the test is discontinued or not.

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Stroop Subtest 1 Score Sheet
Circle E if participant responds with the wrong word.

1 Blue E	2 Blue E	3 Yellow E	4 Green E	5 Red E
6 Blue E	7 Yellow E	8 Yellow E	9 Green E	10 Yellow E
11 Red E	12 Red E	13 Green E	14 Red E	15 Green E
16 Red E	17 Blue E	18 Blue E	19 Green E	20 Red E
21 Yellow E	22 Green E	23 Yellow E	24 Yellow E	25 Green E
26 Red E	27 Red E	28 Green E	29 Yellow E	30 Red E
31 Blue E	32 Yellow E	33 Blue E	34 Blue E	35 Yellow E
36 Green E	37 Blue E	38 Blue E	39 Green E	40 Red E

Number of errors: _____

Number correct: _____

Time to complete test (maximum 2 minutes=120 seconds)

Stopwatch reading:

	:		
--	---	--	--

Total time converted to seconds:

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Stroop Subtest 1 given? ₁ <input type="checkbox"/> Yes ₂ <input type="checkbox"/> No If no, check reason: ₁ <input type="checkbox"/> Physical → If physical: ₂ <input type="checkbox"/> Vision ₃ <input type="checkbox"/> Hearing ₄ <input type="checkbox"/> Other (specify) _____ ₁ <input type="checkbox"/> Uncooperative/refused ₁ <input type="checkbox"/> Can't read ₁ <input type="checkbox"/> Other (specify) _____

Staff ID

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Stroop Subtest 2

Patient ID	<input type="text" value="[affix ID label here]"/>	Date Form Completed	<input type="text" value=""/> /	<input type="text" value=""/> /	<input type="text" value=""/>
		Month	Day	Year	
Administration Type	<input type="text"/>	Visit Code	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Reviewed by	<input type="text"/>	<input type="text"/>	Language <input type="text" value="E"/>

Administration:

Time allowed for Stroop Subtest 2 = 2 minutes (120 seconds)

If participant does not understand directions on Subtest 2, technician may repeat up to two times. If participant still does not understand instructions, technician should move on to Subtest 3. Participant is allowed to hold the paper by the edges but is not allowed to point to the items.

After the test begins, should the participant start over or stop suddenly, DO NOT stop the stopwatch. Just say, "**Please continue.**" (If participant says a color in error and self-corrects, continue with test and do not count a self-correction as an error.)

Practice:

Give the participant the test sheet and say, "**Remember, you may hold this sheet firmly by the edges or you may lay it flat on the table but please do not point to the items. Going left to right, please name the first three colors presented on this sheet as fast as possible.**" (While giving instructions, show the sheet to the participant. CHECK TO MAKE SURE THE ARROWS ARE POINTING UPWARD. Run your finger from left to right in the first row. Correct participant response is: green, red, yellow.)

If it is done incorrectly, then repeat the instructions and ask the participant to try again up to two more times.

Test:

"When I tell you to begin, start at the beginning of the first line going left to right, and please name the colors of the squares as fast as possible. Do it line by line." (While giving instructions, show the sheet to the participant and run your finger from left to right in the first row, then the second row, and then the third row.) **"Go ahead."**

Scoring:

Start the stopwatch as soon as the participant starts to read/name colors.

Record:

- 1) The time it takes to go through Subtest 2
- 2) Number of errors in Subtest 2 (circle the E for error below the color). Note: If participant says a color in error and self-corrects, continue with test and do not count a self-correction as an error.
- 3) Number correct in Subtest 2.
- 4) If participant exceeds two-minute time limit, place an "X" in the box after the last correct response.

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Stroop Subtest 2 Score Sheet
Circle E if participant responds with the wrong word.

1 Green E	2 Red E	3 Yellow E	4 Yellow E	5 Red E
6 Blue E	7 Green E	8 Blue E	9 Blue E	10 Yellow E
11 Yellow E	12 Red E	13 Blue E	14 Yellow E	15 Blue E
16 Green E	17 Red E	18 Blue E	19 Green E	20 Red E
21 Blue E	22 Yellow E	23 Green E	24 Blue E	25 Red E
26 Yellow E	27 Green E	28 Red E	29 Green E	30 Yellow E
31 Yellow E	32 Green E	33 Yellow E	34 Green E	35 Red E
36 Blue E	37 Blue E	38 Red E	39 Green E	40 Red E

Number of errors: _____

Number correct: _____

Time to complete test (maximum 2 minutes=120 seconds)

Stopwatch reading:

	:		

Total time converted to seconds:

Stroop Subtest 2 given? Yes No If no, check reason:
 Physical → If physical: Vision Hearing Other (specify) _____
 Uncooperative/refused
 Can't read
 Other (specify) _____

Staff ID

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Stroop Subtest 3

Patient ID	<input type="text" value="[affix ID label here]"/>	Date Form Completed	<input type="text" value=""/> /	<input type="text" value=""/> /	<input type="text" value=""/>
			Month	Day	Year
Administration Type	<input type="text"/>	Visit Code	<input type="text"/>	<input type="text"/>	<input type="text"/>
		Reviewed by	<input type="text"/>	<input type="text"/>	Language <input type="text" value="E"/>

Administration:

Time allowed for Stroop Subtest 3 is 3 minutes

If participant does not understand directions on Subtest 3 of Stroop, technician may repeat up to two times. If participant still does not understand instructions, technician should move on to the next test.

After the test begins, should the participant start over or stop suddenly, DO NOT stop the stopwatch. Just say, "**Please continue.**" (If participant says a color in error and self-corrects, continue with test and do not count a self-correction as an error.)

Practice:

Give the participant the test sheet and say, "**Remember, you may hold this sheet firmly by the edges or you may lay it flat on the table but please do not point to the items. Going left to right, please name the color in which each of the first three words is printed. That is, I want you to name the color of the ink, not to read the word.**" (While giving instructions, show the sheet to the participant and run your finger from left to right in the first row. Correct participant response is: yellow, red, blue.)

If it is done incorrectly, then repeat the instructions and ask the participant to try again up to two times.

Test:

"When I tell you to begin, start at the beginning of the first line going left to right, and please name as fast as possible the color of the print, not to read the word. Do it line by line." (While giving instructions, show the sheet to the participant and run your finger from left to right in the first row, then the second row, and then the third row.) **"Go ahead."**

Scoring:

Start the stopwatch as soon as the participant starts to read/name colors.

Record:

- 1) The time it takes to go through Subtest 3
- 2) Number of errors in Subtest 3 (circle the E for error below the color). Note: If participant says a color in error and self-corrects, continue with test and do not count a self-correction as an error.
- 3) Number correct in Subtest 3.
- 4) If participant exceeds three-minute time limit, place an "X" in the box after the last correct response.

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Stroop Subtest 3 Score Sheet
Circle E if participant responds with the wrong color.

1 Yellow E	2 Red E	3 Blue E	4 Yellow E	5 Red E
6 Red E	7 Yellow E	8 Yellow E	9 Red E	10 Red E
11 Blue E	12 Green E	13 Red E	14 Red E	15 Green E
16 Blue E	17 Yellow E	18 Green E	19 Blue E	20 Green E
21 Green E	22 Blue E	23 Yellow E	24 Green E	25 Yellow E
26 Blue E	27 Red E	28 Yellow E	29 Green E	30 Red E
31 Blue E	32 Green E	33 Yellow E	34 Blue E	35 Green E
36 Blue E	37 Yellow E	38 Red E	39 Blue E	40 Green E

Number of errors: _____

Number correct: _____

Time to complete test (maximum 3 minutes=180 seconds)

Stopwatch reading:

	:		
--	---	--	--

Total time converted to seconds:

--	--	--

Stroop Subtest 3 given? 1 <input type="checkbox"/> Yes 2 <input type="checkbox"/> No If no, check reason: 1 <input type="checkbox"/> Physical → If physical: 2 <input type="checkbox"/> Vision 3 <input type="checkbox"/> Hearing 4 <input type="checkbox"/> Other (specify) _____ 1 <input type="checkbox"/> Uncooperative/refused 1 <input type="checkbox"/> Can't read 1 <input type="checkbox"/> Other (specify) _____
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Staff ID

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