I. General Information

Title of the test: Neuro-QOL

Author: David Cella, PhD and Claudia Moy, PhD

Publisher: Neuro-QOL team

Time required to administer: Each instrument may take 15 minutes or less, depending if they are given the long or short form. On average, subjects answer about 5 questions per minute.

Cost of the Test: There is no charge to take use this test. The forms and manual are available at www.neuroqol.org. However, they do ask that you let them know if and for what purpose you intend to use it by emailing kiling@northwestern.edu.

II. Description of Test

Type/Purpose of Test: Neuro-QOL is a collection of instruments that evaluate a range of domains related to neurologic functioning. Each instrument is a self-report test that measures health-related quality of life in both adults and children. Evaluates symptoms, concerns, and issues that are relevant across conditions. Enables within-disease and cross-disease comparisons. The thirteen domains for adults, each measured with its own separate instrument, are: anxiety, depression, fatigue, upper motor extremity function – fine motor/ADL, lower extremity function – mobility, applied cognition – executive function, applied cognition – general concerns, emotional and behavioral dyscontrol, positive affect and well-being, sleep disturbance, ability to participate in social roles and activities, satisfaction with social roles and activities, stigma, communication, end of life concerns, bowel function, urinary/bladder function, and sexual function.

Population: Developed for individuals with neurologic disorders, such as stroke, multiple sclerosis, amyotrophic lateral sclerosis, Parkinson's disease, epilepsy, and muscular dystrophy.

Focus of measurement:

___ Organic systems  X Abilities  X Participation/life habits  ___ Environmental Factors

III. Practical Administration

Ease of Administration:

This test is very simple and in most cases would be easy to administer. However, as it is a self-report test, it may be difficult to administer to a client with cognitive deficits or language barriers.

Clarity of Directions:

As the test is a self-report measure, the directions are very simple. The subject is given a list of items related to the area that the instrument is testing, and for each item is asked to mark whether the item occurs: Never, Rarely, Sometimes, Often, or Always. The manual instructs that the subject should consider the past seven days when answering these questions.

Scoring Procedures:

Each response on the scoresheet is assigned a number, 1-5. These numbers are added up at the end of an instrument to determine the raw score. The raw score is then converted to an IRT-based T-score using reference tables in the manual. A
higher T-score represents more of the concept being measured. For instance, if the instrument is called “Satisfaction with Social Roles and Activities, a higher score is better, but if it is called “anxiety,” then a lower score is better.

Examiner Qualification & Training
No prerequisite qualifications are necessary to administer this test. However, the administrator should have a background in neurology and psychology to interpret results.

IV. Technical Considerations

Standardization: X Norms  ____ Criterion Referenced  ____ Other __________________

Reliability: internal consistency – 0.85-0.97 for short forms, correlation between short forms and full-length item banks – 0.88-0.99 (Cella et al, 2012)

Validity: only preliminary evidence to support construct validity

Manual: _____ Excellent  X Adequate  ____ Poor

What is (are) the setting/s that you would anticipate using this assessment?
Outpatient, home-health.

Summary of strengths and weaknesses

Weakness:
- Only available in English and Spanish
- Limited research on reliability and validity

Strength:
- Easy and quick to administer
- Instruments available covering a wide variety of issues related to neurological disorders
- Most instruments are available in Spanish
- From client’s point of view
- Has both long and short forms