

OCTH 6260-Spring- Assessment Rating Form

I. General Information

Title of the test: Contextual Memory Test (CMT)

Author: Joan P. Toglia

Publisher: Therapy Skill Builders

Time required to administer: 10-20 minutes (Part I), 15-20 minute delay if additional testing is needed.

Cost of the Test:

Complete kit includes: manual, 2 test cards, 14 cut-apart sheets (80 picture cards), 25 score sheets, vinyl carrying case - \$142.00

Additional score sheets: pkg of 25 - \$55.50

II. Description of Test

Type/Purpose of Test: Interview / Questionnaire format; designed to objectively investigate awareness and strategy use in adults with memory impairment. It assesses three related areas of memory which include: awareness of memory capacity, recall of line-drawn items, and strategy use. This is a dynamic assessment where the examiner can provide cues and use strategies to optimize the client's performance. It can also be used as a screening tool to identify if a client has a memory deficit and whether further investigation is needed.

Population: The CMT was developed for adults 18 years of age and older with a neurological or organic memory impairment. This includes people with head trauma, cerebral vascular disorders, dementia, multiple sclerosis, Parkinson's disease, brain tumor, AIDS, epilepsy, or chronic alcohol abuse.

Focus of measurement:

Organic systems Abilities Participation/life habits Environmental Factors

III. Practical Administration

Ease of Administration: Fairly easy to administer once the administration protocol is understood. Scoring and interpretation is more complex.

Clarity of Directions: The manual is lengthy and somewhat confusing. Although the administration protocol is easy to follow, the scoring and interpretation processes are difficult to understand.

Scoring Procedures:

1. Administer the assessment and record the responses into the appropriate columns on the score card.

2. Convert the recall scores into standard scores and compare them to normative performance (table 8).
3. Classify standard scores into the categories of WNL, suspect, mild, moderate, or severe.

Examiner Qualification & Training

No certification required. Examiner should be familiar with the administration protocol and understand how to use a dynamic assessment. This includes providing cues to the client and identifying strategies to help the client optimize his or her performance. The examiner should also have a good understanding of the scoring and interpretation because it can be complicated.

IV. Technical Considerations

Standardization: Norms Criterion Referenced Other _____

Reliability:

- Good reliability (.73-.81) between immediate, delayed and total scores compared between non-context and context versions; moderate to highly moderate.
- Test re-test reliability shown to be highly reliable (control .74-.87 vs. .85-.94)
- Predictive scores were found to be highly reliable (.90)
- Strategy scores had high correlation between the two versions (.75)

Validity:

- Good concurrent reliability was established when immediate, delayed, and total recall scores were correlated with RBMT
- Show to have the ability to discriminate between individuals who are non-disabled and those with brain injury

Manual: Excellent Adequate Poor

What is (are) the setting/s that you would anticipate using this assessment?

Hospitals, rehab facilities, outpatient clinics, etc

Summary of strengths and weaknesses:

Weaknesses:

- Not standardized on general population; additional research required on psychometric testing
- It is not diagnostic; must be used in conjunction with other tests of memory and cognition such as Rivermead Behavioral Memory Test
- Manual is confusing and lengthy
- Scoring and interpretation of results are difficult
- Inappropriate tool for individuals with moderate or severe aphasia or visual perceptual deficits
- May be affected by language or cultural barriers if the client is unable to recognize or name the items

Strengths:

- Easy to administer (5-10 minutes)
- Easy to transport (can be used at bedside)
- Screens for memory dysfunction
- Uses pictures of everyday objects
- Provides objective measures of awareness and strategy use
- Screens for memory dysfunction
- Links assessment results with treatment and suggests areas for additional testing
- Based on the theory of memory
- Allows for contextual prompts
- Allows for alternative description names
- Adaptations made for language barriers and clients with dysphasia
- Flexible in testing procedures (recall vs. recognition)

References:

Toglia, J.P. (1993). *Contextual Memory Test*. San Antonio, TX: Therapy Skill Builders.