## Brain Function Assessment Form ${ }^{\text {¹4 }}$ (BFAF)

Name: $\qquad$ Age: $\qquad$ Sex: $\qquad$ Date:

Please circle the appropriate number on all questions below. 0 as the least/never to 3 as the most/always.

## SECTION 1

- A decrease in attention span
- Mental fatigue
- Difficulty learning new things
- Difficulty staying focused and concentrating for extended periods of time

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- Experiencing fatigue when reading sooner than in the past

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- Experiencing fatigue when driving sooner than in the past

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$\begin{array}{llll}0 & 1 & 2\end{array}$
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## SECTION 2

- Twitching or tremor in your hands and legs when resting
- Handwriting has gotten smaller and more crowded together
- A loss of smell to foods
- Difficulty sleeping or fitful sleep
- Stiffness in shoulders and hips that goes away when you start to move
$\begin{array}{llll}0 & 1 & 2 & 3\end{array}$
- Constipation
- Voice has become softer

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$\begin{array}{llll}0 & 1 & 2\end{array}$

- Facial expression that is serious or angry

0123

- Episodes of dizziness or light-headedness upon standing
$\begin{array}{llll}0 & 1 & 2 & 3\end{array}$
- A hunched over posture when getting up and walking


## SECTION 3

- Memory loss that impacts daily activities

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- Difficulty planning, problem solving, or working with numbers
$\begin{array}{llll}0 & 1 & 2 & 3\end{array}$
- Difficulty completing daily tasks
- Confusion about dates, the passage of time, or place
- Difficulty understanding visual images and spatial relationships (addresses and locations)
$\begin{array}{llll}0 & 1 & 2\end{array}$
- Difficulty finding words when speaking
- Misplacement of things and inability to retrace steps
- Poor judgment and bad decisions
- Disinterest in hobbies, social activities, or work
- Personality or mood changes


## SECTION 4

- Reduced function in overall hearing $\quad 0 \quad \mathbf{0}$
- Difficulty understanding language with background or scatter noise
$\begin{array}{llll}0 & 1 & 2 & 3\end{array}$
-Ringing or buzzing in the ear $\quad 0 \begin{array}{lll}0 & 1 & 2\end{array}$
- Difficulty comprehending language without perfect pronunciation
$\begin{array}{llll}0 & 1 & 2\end{array}$
- Difficulty recognizing familiar faces

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- Changes in comprehending the meaning of sentences, written or spoken
$\begin{array}{llll}0 & 1 & 2\end{array}$
- Difficulty with verbal memory and finding words $\quad \begin{array}{llll}0 & 1 & 2 & 3\end{array}$
- Difficulty remembering events $\begin{array}{llll}0 & 1 & 2 & 3\end{array}$
- Difficulty recalling previously learned facts and names $\begin{array}{lllll}0 & 1 & 2 & 3\end{array}$
- Inability to comprehend familiar words when read $\quad \begin{array}{llll}0 & 1 & 2 & 3\end{array}$
- Difficulty spelling familiar words $\quad 0 \begin{array}{llll}0 & 1 & 2 & 3\end{array}$
- Monotone, unemotional speech 0
- Difficulty understanding the emotions of others when they speak (nonverbal cues)

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- Disinterest in music and a lack of appreciation for melodies
$\begin{array}{llll}0 & 1 & 2\end{array}$
- Difficulty with long-term memory
- Memory impairment when doing the basic activities of daily living

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- Difficulty with directions and visual memory
$\begin{array}{llll}0 & 1 & 2\end{array}$
- Noticeable differences in energy levels throughout the day


## SECTION 5

- Difficulty coordinating visual inputs and hand movements, resulting in an inability to efficiently reach for objects
$\begin{array}{llll}0 & 1 & 2\end{array}$
- Difficulty comprehending written text $\begin{array}{llll}0 & 1 & 2 & 3\end{array}$
- Floaters or halos in your visual field
- Dullness of colors in your visual field during different times of the day

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- Difficulty discriminating similar shades of color


## Brain Function Assessment Form ${ }^{\text {Tw }}$ (BFAF)

Please circle the appropriate number on all questions below. 0 as the least/never to 3 as the most/always.

## SECTION 6

- Difficulty with detailed hand coordination
- Difficulty with making decisions
- Difficulty with suppressing socially inappropriate thoughts
- Socially inappropriate behavior
- Decisions made based on desires, regardless of the consequences
- Difficulty planning and organizing daily events
- Difficulty motivating yourself to start and finish tasks
- A loss of attention and concentration


## SECTION 7

- Hypersensitivities to touch or pain
- Difficulty with spatial awareness when moving, laying back in a chair, or leaning against a wall
- Frequently bumping into the wall or objects
- Difficulty with right-left discrimination
- Handwriting has become sloppier
- Difficulty with basic math calculations
- Difficulty finding words for written or verbal communication
- Difficulty recognizing symbols, words, or letters


## SECTION 8

- Difficulty swallowing supplements or large bites of food
- Bowel motility and movements slow
$\begin{array}{llll}0 & 1 & 2 & 3\end{array}$
$\begin{array}{llll}0 & 1 & 2 & 3\end{array}$
- Bloating after meals
$\begin{array}{llll}0 & 1 & 2\end{array}$
- Dry eyes or dry mouth
$\begin{array}{llll}0 & 1 & 2\end{array}$
- A racing heart
$\begin{array}{llll}0 & 1 & 2\end{array}$
- A flutter in the chest or an abnormal heart rhythm
$\begin{array}{llll}0 & 1 & 2\end{array}$
- Bowel or bladder incontinence, resulting in staining your underwear
$\begin{array}{llll}0 & 1 & 2 & 3\end{array}$
$\begin{array}{llll}0 & 1 & 2 & 3\end{array}$
$\begin{array}{llll}0 & 1 & 2\end{array}$
$\begin{array}{llll}0 & 1 & 2 & 3\end{array}$
$\begin{array}{llll}0 & 1 & 2\end{array}$
$\begin{array}{llll}0 & 1 & 2\end{array}$
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$\begin{array}{llll}0 & 1 & 2 & 3\end{array}$
$\begin{array}{llll}0 & 1 & 2 & 3\end{array}$
$\begin{array}{llll}0 & 1 & 2\end{array}$
$\begin{array}{llll}0 & 1 & 2 & 3\end{array}$
$\begin{array}{llll}0 & 1 & 2\end{array}$
$\begin{array}{llll}0 & 1 & 2 & 3\end{array}$
$\begin{array}{llll}0 & 1 & 2\end{array}$

## SECTION 9

| - A decrease in movement speed | $\mathbf{0}$ | $\mathbf{1}$ | $\mathbf{2}$ | $\mathbf{3}$ |
| :--- | :--- | :--- | :--- | :--- |
| - Difficulty initiating movement | $\mathbf{0}$ | $\mathbf{1}$ | $\mathbf{2}$ | $\mathbf{3}$ |
| - Stiffness in your muscles (not joints) | $\mathbf{0}$ | $\mathbf{1}$ | $\mathbf{2}$ | $\mathbf{3}$ |
| - A stooped posture when walking | $\mathbf{0}$ | $\mathbf{1}$ | $\mathbf{2}$ | $\mathbf{3}$ |
| - Cramping of your hand when writing | $\mathbf{0}$ | $\mathbf{1}$ | $\mathbf{2}$ | $\mathbf{3}$ |

## SECTION 10

- Abnormal body movements (such as twitching legs) $\begin{array}{llll}0 & 1 & 2 & 3\end{array}$
- Desires to flinch, clear your throat, or perform some type of movement
$\begin{array}{llll}0 & 1 & 2 & 3\end{array}$
- Constant nervousness and a restless mind $\quad 0 \begin{array}{llll}0 & 1 & 2 & 3\end{array}$
- Compulsive behaviors
- Increased tightness and tone in specific muscles
$\begin{array}{llll}0 & 1 & 2\end{array}$
$\begin{array}{llll}0 & 1 & 2\end{array}$


## SECTION 11

- Difficulty with balance, or balance that is noticeably worse on one side
$\begin{array}{llll}0 & 1 & 2 & 3\end{array}$
- A need to hold the handrail or watch each step
carefully when going down stairs
- Episodes of dizziness $\begin{array}{llll}0 & 1 & 2 & 3\end{array}$
- Nausea, car sickness, or seasickness $\quad 0 \begin{array}{llll}0 & 1 & 2 & 3\end{array}$
- A quick impact after consuming alcohol $\begin{array}{llll}0 & \mathbf{1} & 2 & 3\end{array}$
- A slight hand shake when reaching for something $\quad \begin{array}{llll}0 & 1 & 2 & 3\end{array}$
- Back muscles that tire quickly when standing or walking
$\begin{array}{llll}0 & 1 & 2 & 3\end{array}$
- Chronic neck or back muscle tightness

