Appendix 1: Neuropsychological Testing

Neuropsychological testing will include all or parts of the following tests. Only parts will be used where the same information has already been collected elsewhere or in the interests of time. To provide flexibility of study proceedures to minimise the burden of participation for participants, the questions can be asked by a study researcher in person, or by phone, or possibly posted to the patient to complete and return. Those which can only be done by the patient personally completing a form are referred to as 'patient facing'.

Patient facing:

Trail Making Test A and B timed - Connecting 25 targets in a sequential order as numbers (TMT-A) and alternating between numbers and letters (TMT-B) with recording of time taken to compete each test

Letter digit coding test (LDCT): 60 second test of processing speed whereby participant fills numbers in boxes to match corresponding letters

Boston Naming Test- Naming of 15 items presented as pictures

Non patient facing:

Montreal Cognitive Assessment (MoCA): 30 item instrument testing visuospatial/executive function, naming, memory, attention, language, abstraction, delayed recall and orientation

The Modified Telephone Interview for Cognitive Status (TICS-m): orientation, registration, comprehension, semantic and recent memory, delayed recall

Hopkins verbal learning test - Memorising a list of 12 words presented in three consecutive trials, followed by recall and recognition after a delay

Phonemic Fluency- Number of words beginning with the letter 'a' and 's' generated within 60 s

Semantic Fluency - Number of animal names generated within 60 s

QUESTIONNAIRES

To the Patient and can be completed by the Informant on the Patient's behalf

Modified Rankin Scale (mRS)

Rockwood Clinical frailty scale (CFS)

Barthel Index (BI)

Lawton Instrumental Activities of Daily Living

The Patient Health Questionnaire 9 (PHQ-9) (includes PHQ-2 screening questions)

The Patient Health Questionnaire Somatic, Anxiety and Depressive Symptom Scales (PHQ-SADS) (an extended version of the PHQ-9 including 15 extra questions about somatic symptoms)

Generalized Anxiety Disorder scale (GAD-7) (includes GAD-2 screening questions)

Zung Self-Rating depression scale (short ZUNG)

Brief fatigue inventory (BFI)

Short form Stroke Impact Scale (SF-SIS)

Office for national statistics – personal wellbeing questionnaire (ONS-4)

EQ-5D-3L with Visual Analogue Scale (VAS)

ONS-4 (well being)

To the Informant specifically

Apathy screening question from Neuropsychiatric Inventory

Single delirium screening question from the 4AT delirium screening tool

The Informant based questionnaire on cognitive decline in the elderly (IQCODE) - a well validated measure of cognitive change over the last years. The 16-item paper based questionnaire is designed to be completed by an informant or proxy.

Neuropsychiatric Inventory Questionnaire (NPI-Q) - a test of some of the behaviours commonly seen in patients with dementia. This test is done with an informant care giver, preferably someone who lives with the patient. The 12 item questionnaire can be self-administered by informant or conducted as part of an interview

Staged assessment for R4VaD study

Baseline assessment. Try to complete in person, but not necessarily one sitting

Running time will be reduced by 5 mins if items 1, 18-20 and 22 are taken from informant

1	Modified Rankin scale (pre-stroke) and place of residence		This is the minimum dataset required at	2 min
2	Five words (repeat) Face velvet church daisy red		baseline, complete tests in order	
3	Orientation Date/month/year/day/place/city			
4	Phonemic fluency – letter 'F' one minute		Ideally complete all of Q1-8, but	
5	Five word recall (words from 2)	MoCA	participant can stop at any time	7 min
			7	8 min
			Score for 1 can be taken from informant	9 min
6	Attentional tasks: number reversing, tapping, serial	MoCA, Along with 3 this	(if available)	
	subtraction (MOCA)	gives 4A-test	Interview could stop here. If patient	
		-	able to continue go to next steps	10 min
7a	Copy cube	MoCA	This is the core dataset with more	
7b	Clock drawing	MoCA	emphasis on cognition	
8	Animal naming	MoCA	Try to complete all of these in order,	
9	Language and abstraction	MoCA	but participant can stop at any time	
10	Trail making A+B	MoCA /Trails, along with		
		2,3,4,5,8 gives full MoCA	┧	20min
			Interview could stop here	
11	Two question depression screener - Over last two weeks have		If patient able to continue go to next	
	you felt down, depressed, hopeless		steps	
	Have you had little pleasure in doing things	PHQ-2	_	
12	Two question and anxiety screener - Have you been feeling			
	nervous, anxious or on edge			
	Have you been unable to stop or control worrying	GAD-2	_	
13	Word list recall immediate	TICS-M	_	
14	Orientation age and phone number	TICS-M		
15	Comprehension, semantic, recent memory	TICS-M		
16	Word list recall delayed	TICS-M, along with 3, 8, 11		
		gives full TICS-M		25 min
17	Depression Qs	Short Zung	This is the preferred dataset	
18	Clinical frailty score	CFS	Scores for 18-20 can be taken from	
19а-с	Short Barthel 3 Qs	Short Barthel Pre-stroke	informant (if available)	
20a-h	Instrumental ADLs	Lawton IADL pre-stroke	Interview could stop here	
21	Fatigue screening question	BFI screening	If patient willing go to next steps	30 min

22a-g	Remaining questions from Barthel index	Barthel Pre-stroke	This is the extended dataset	
23a-h	PHQ-9	PHQ-9	Scores for 22 can be taken form	
24a-g	GAD7	GAD7	informant (if available)	
			Interview stops here	40min

6+/-2 week post-baseline assessment Administration time will be reduced by 10 mins if 1,22-24 and 28 are taken from informant. If patient unable to complete mood questions, informant versions are available 10-12, 19, 32 are not possible if administered via telephone

1	Modified Rankin scale and place of residence	mRS	This is the minimum dataset required at	2 min
2	Five words (repeat) Face velvet church daisy red		baseline, complete tests in order	
3	Orientation Date/month/year/day/place/city		participant can stop at any time	
4	Phonemic fluency – letter 'F' one minute		Score for 1 can be taken from informant	
5	Five word recall (words from 1)	MoCA	(if available)	7 min
			Interview could stop here. If patient	8 min
			able to continue go to next steps	9 min
6	Attentional tasks: number reversing, tapping, serial subtraction	MoCA, Along with 3 this gives		
		4A-test		10min
7	Language and abstraction from MoCA		This is the core dataset with more	
8	Cube, clock from MoCA	Along with 2-5,8 this give full	emphasis on cognition	
9	Animal naming from MoCA	MoCA		
10	Trails A and B	With 2-5,8,9,10,11 this	Try to complete all of these in order,	
		completes the ESO test	but participant can stop at any time	
11	Two question depression screener			
12	Two question anxiety screener		Interview could stop here	
13	Word list recall from TICS-m (10 words) immediate		If patient able to continue go to next	
14	Orientation questions from TICS-M (age, 'phone number)		steps	
15	Comprehension, semantic, recent memory from TICS-m			
16	Word list recall from TICS-m (10 words) delayed			
17	Remainder of PHQ-9	With 6 this completes PHQ		
18	Remainder of GAD-7	With 7 this completes GAD		
19	Letter digit coding	LCDT		35 min
20	Somatic/depression/anxiety/panic questions to complete	PHQSADS. With 11, 12	This is the preferred dataset	
	PHQSADS	completes PHQ		
21	Depression questions from short Zung	short Zung		40 min
<mark>22</mark>	Clinical frailty score	CFS	Scores for 22-24 can be taken from	45 min

23	Short form Barthel Index	Barthel short form	informant (if available)	
<mark>24</mark>	Lawton Extended-ADL	Lawton IADL	Interview could stop here	
25	Screening question from brief fatigue inventory	BFI screening	If patient willing go to next steps	
26	EQ-5D-3L and Visual Analogue Scale	EQ-5D-3L and VAS		
27	HVLT Trials 1-3	HVLT	This is the extended dataset	
<mark>28</mark>	Remainder of Barthel Index	Barthel Index		
29	Remainder of brief fatigue inventory	BFI	Scores for 28 can be taken from	
30	HVLT 4-5	HVLT	informant (if available)	
30	Short form SIS	SF-SIS		
31	ONS-4 (well being)	ONS-4	The interview stops here	
<mark>32</mark>	Boston naming	Boston naming test		
33	Phonemic fluency – letter 'A' and 'S' one minute			
34	Semantic fluency – animal naming			65 min

Telephone assessment (annual) Administration time can be reduced by 5 mins if 1,19,22,24 completed by informant Need to decide if will also ask for paper completed forms to be posted back

8	Repetition and abstraction form MoCA Two question depression screener	PHQ-2	(if available). Interview could stop here. If patient able	6 min
9	Two question anxiety screener	GAD-2	to continue go to next steps.	7 min 10 min
10	Word list recall from TICS-m (10 words) immediate	Along with 2,7,11 this gives	This is the core dataset with more	
	5 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	full TICC		
11	Orientation questions from TICS-M (age, 'phone number)	full TICS-m	emphasis on cognition.	
11 12	Comprehension, semantic, recent memory from TICS-m	Tull TICS-m	Try to complete all of these in order, but	
-		Tuli TiCS-m		20 min
12	Comprehension, semantic, recent memory from TICS-m	Tull TICS-m	Try to complete all of these in order, but	20 min
12 13	Comprehension, semantic, recent memory from TICS-m Word list recall from TICS-m (10 words) delayed	With 7 this completes PHQ	Try to complete all of these in order, but participant can stop at any time	20 min
12 13 14	Comprehension, semantic, recent memory from TICS-m Word list recall from TICS-m (10 words) delayed Digit span		Try to complete all of these in order, but participant can stop at any time Interview could stop here.	20 min

18	Questions from short Zung	Scores for 19-20 can be taken from	
<mark>19</mark>	Short form Barthel Index	informant (if available).	
20	Screening question from Brief Fatigue Inventory	Interview could stop here.	
21	EQ-5D-3L and VAS	If patient willing go to next steps. 35 m	min
22	Remainder of Barthel Index	This is the extended dataset	
23	Remainder of Brief Fatigue Inventory	Scores for 24-6 can be taken from	
<mark>24</mark>	Lawton ADL	informant (if available)	
25	Short form SIS		
26	ONS-4 (well being)	Interview stops here. 40 m	min

Baseline informant assessment All content possible over 'phone

1	IQCODE (16 questions) for pre-stroke cognition	This is the core dataset	
2	Delirium questions from 4-AT		
3	Apathy screening Q from NPI-Q (pre-stroke)		5 min
4	Modified Rankin Scale (pre-stroke)	Not necessary to complete if data	
5	Barthel Index (pre-stroke)	already available from patient	
6	Clinical Frailty Scale (pre-stroke)		
7	Lawton ADL (pre-stroke)		10 min

6+/-2 week post-baseline assessment All content possible over 'phone

1	Modified Rankin Scale and place of residence	mRS current	This is the core dataset	
2	Delirium questions from 4-AT	4AT	Interview could stop here	
3	Apathy screening Q from NPI-Q	NPI-Q apathy		1
				min
4	Barthel Index	Barthel index current	Not necessary to complete if data	
5	Clinical Frailty Scale	CFS current	already available from patient	
5 6	Clinical Frailty Scale Lawton ADL	CFS current Lawton IADL current	already available from patient	

Telephone assessment (annual) for informant

1	Modified Rankin Scale and place of residence	This is the core dataset	
2	IQCODE (16 questions)	Interview could stop here	
3	Delirium questions from 4-AT		
4	Apathy screening Q from NPI-Q		5
			min
5	Full NPI-Q	This is the preferred dataset	

6	Zarit care-giver burden		10
			min
7	Barthel Index	Not necessary to complete if data	
8	Clinical Frailty Scale	already available from patient	
9	Lawton ADL		