Please circle correct answers. Be aware that there may be more than one correct answer per question.

1. Which antiseizure medication is associated with the greatest risk of cognitive impairment?

    A. Keppra/levetiracetam
    B. Lamictal/lamotrigine
    C. Trileptal/oxcarbazepine
    D. Topamax/topiramate
    E. They are roughly of equal risk

2. Which antiseizure medication is associated with the greatest risk of irritability?

    A. Keppra/levetiracetam
    B. Lamictal/lamotrigine
    C. Trileptal/oxcarbazepine
    D. Topamax/topiramate
    E. They are roughly of equal risk

3. Test performance levels can be characterized by different descriptors when writing a report. What is the difference between "normal" performance and "average" performance?

    A. Average performance has specific upper and lower thresholds whereas normal has only a lower level threshold
    B. Average is not an appropriate descriptor for skewed distribution
    C. Average requires appropriate normative test sampling whereas normal is used for tests lacking formal standardization
    D. Average is applied to test scores whereas normal is applied to behavioral observations
    E. There is no difference in meanings, with descriptors only reflecting writing style preferences
    F. None of the above

4. A patient with moderately severe dementia obtains scores on a Performance Validity Test (PVT) that are lower than the publisher recommended threshold. How is this interpreted?

    A. The patient is diagnosed as a malingerer.
    B. The patient is characterized as having poor effort and test scores are not reported.
    C. The patient is characterized as having variable task engagement and test scores are interpreted with appropriate caveats although relevant neuropsych patterns may still be characterized.
    D. The PVT is ignored since it was not validated in the clinical diagnosis being evaluated.
    E. The PVT is thought to reflect the cognitive impairment associated neurologic disease.
    F. None of the above

5. What is the difference between "significant" difference between test scores and a "meaningful" difference between test scores.

    A. A significant difference is one that is empirically based upon within subject variability, with meaningful difference reflecting a magnitude of difference thought to be clinically relevant in the absence of empirical base rate differences.

B. A significant difference is one in which empirical base rates are p<.01.

C. A meaningful difference is one that comports with patient self-report.

D. There is no difference in meanings, with descriptors only reflecting writing style preferences

E. None of the above

6. A 75-year-old woman with a 10-year history of Parkinson disease undergoes DBS due to fluctuations in "on" and "off" periods that result in a poor quality of life. During her preoperative evaluation, her neuropsychological profile was considered to only reflect age-related weaknesses. Upon post-operative testing, you would expect to see:

A. No change since she had normal preoperative neuropsychological test scores.

B. Multiple neuropsychological domain changes due to normal preoperative neuropsychological test scores.

C. Decline in generative verbal fluency.

D. Decline in confrontation naming.

E. Increase performance on Block Design due to practice effects.

F. None of the above

7. What deficits can be expected with pyramidal motor dysfunction that may not be present with extrapyramidal lesions?

A. Babinski sign

B. Hemi-spatial inattention

C. Wallerian degeneration

D. Dystonia

E. Spasticity

F. None of the above

8. What is the difference between "impaired performance" and "performance that is in the impaired range?"

A. There is no difference in meanings, with descriptors only reflecting writing style preferences.

B. Impaired performance describes qualitative findings for which formal norms do not exist whereas impaired performance is used when normative percentiles are available to guide interpretative inference.

C. Impaired performance reflects an inability to adequate perform on a task whereas performance in the impaired range may reflect either poor ability or low scores due to insufficient task engagement.

D. Impaired performance reflects scores lower than expected premorbid thresholds whereas scores in the impaired range are lower than the 5th percentile.

9. In a normal distribution, approximately what percentage of scores is observed between -1 SD and +1 SD above the mean?

A. 25%

B. 50%

C. 67%

D. 90%

E. 95%

F. None of the above

10. Reliable change index (RCI) scores facilitate interpretation of follow-up neuropsychological test results. Which of the following is true regarding RCIs?

A. RCIs are an objective measure of clinically meaningful change.

B. RCIs must be empirically derived from persons who have been tested on multiple occasions in the absence of treatment interventions.

C. A 90% RCI is preferred to an 80% RCI.

D. A decline in function cannot be inferred unless the difference score is greater than an *a priori* statistical threshold

E. None of the above

11. A 78-year-old man undergoes a neuropsychological evaluation, and his animal fluency scores are at the 8th percentile whereas his FAS COWA scores are at the 51st percentile. Which of the following diagnoses is this this most consistent with?

A. Alzheimer's disease

B. Focal epilepsy

C. Multiple Sclerosis

D. Left MCA stroke

E. Major depression

F. None of the above

12. A 45-year-old woman man undergoes a neuropsychological evaluation, and her animal fluency scores are at the 51st percentile whereas hers FAS COWA scores are at the 8th percentile. Which of the following diagnoses is this this most consistent with?

A. Alzheimer's disease

B. Focal epilepsy

C. Multiple Sclerosis

D. Left MCA stroke

E. Major depression

F. None of the above

13. What cognitive domain is particularly important to characterize in a patient with suspected dementia with Lewy Bodies?

A. Executive

B. Language

C. Visuospatial

D. Memory

E. Theory of Mind

F. None of the above

14. Which of the following is the most mispronounced?

A. Zajonc

B. Papez
C. Teratogen
D. Tinnitus
E. Febrile
F. All of the above 😊

15. Subjective memory concerns are most closely correlated with:

A. Logical Memory
B. Complex Figure Memory
C. Wisconsin Card Sort Failure to Maintain Set
D. Depression
E. Insurance status
F. None of the above

16. A retired 73 year old African American Georgia Tech mechanical engineering professor is referred for evaluation for possible primary progressive aphasia (PPA). Upon testing, you find that his Boston Naming Test, FAS COWA, and animal fluency are all in the low average range using Heaton demographic correction. Based upon this finding, you should:

A. State that he likely does not have PPA but that he should re-evaluated in a year to test for possible interval progression.
B. State that he likely has PPA since you would expect a Georgia Tech professor to be at least in the average range on language tasks.
C. Use White norms to characterize performance levels on these language tasks.
D. Ask if there has been subjective decline from patient and his spouse
E. Refer to a Speech and Language pathologist
F. None of the above

17. Ribot's law suggests:

A. Word pronunciation is a good estimate of premorbid function
B. The earlier in childhood a brain injury occurs, the greater the likelihood of a good cognitive outcome.
C. There will be a least one neuropsychological test in the impaired range when a large number of neuropsychological measures are examined
D. Cognitive decline following epilepsy surgery in high functioning patients is primarily due to regression toward the mean.
E. With congenital failure of a primary sensory system, there is overcompensation of a remaining sensory system.
F. None of the above

18. When a patient is left hand dominant, then:

A. There is a high likelihood of reversed cerebral laterality (*situs inversus),*
B. One cannot infer lesion laterality based upon focal neuropsychological findings.
C. There is a modest likelihood atypical language lateralization (right or mixed langue dominance)
D. They likely sustained an early left hemisphere brain lesion (i.e., pathological left handedness)

E. They are at increased biologic risk for developing epilepsy

F. None of the above

19. Clock drawing is a common dementia screening test because:

A. It's free
B. Permits evaluation of executive function in a relatively non-structured context
C. Requires higher-order/multi-sequence task comprehension
D. Does not require language-specific norms for interpretation
E. It is short and generally well-tolerated by the patient

20. Which of the following are true regarding psychogenic non-epileptic seizures?

A. They are not real seizures
B. They are often seen in the context of a sexual or other abuse history
C. Can only be effective treated by a psychiatrist
D. Can be misdiagnosed in patients with frontal lobe epilepsy without proper EEG evaluation
E. Often have a genetic predisposition
F. None of the above

21. Which of the following tasks is considered a measure of motor programming?

A. Finger Tapping
B. Grooved Pegboard
C. Fist-Edge-Palm
D. Crossed Response Inhibition
E. Trail Making (Part B)
F. None of the above

22. The Emory Neurology Server is not available due to a Ransomware Attack, and all scoring algorithms are unavailable. What rule-of-thumb thresholds would be accurate to characterize performance on FAS COWA?

A. Fewer than 5 words per trial
B. Fewer than 7 words per trail
C. Fewer than 10 words per trial
D. Fewer than 15 words per trial
E. Fewer than 20 words per trial
F. None of the above

23. Access to the Emory Neurology Server is not available because your left your laptop in your car when going to the store and your car was stolen while you were shopping. What rule-of-thumb thresholds would be accurate to characterize performance on Animal Fluency?

A. Fewer than 5 words
B. Fewer than 7 words
C. Fewer than 10 words
D. Fewer than 15 word
E. Fewer than 20 words

F. None of the above

24. Your 27-year-old patient dropped out of school during the 8th grade after Christmas vacation, but completed a GED approximately 7 years later. For demographic correction, what level of education should be used?

A. 7 years
B. 8 years
C. 10 years
D. 12 years
E. None of the above

25. Which of the following are true regarding Telehealth Neuropsychological Evaluations?

A. They can be conducted anywhere in the US as long as reliable internet connectivity can be established
B. They can only be conducted by licensed neuropsychologists who have completed recognized formal training modules in Telehealth
C. The patient must be in Georgia at the time of evaluation although the psychologist can be anywhere in the US.
D. The psychologist must be in Georgia at the time of evaluation although the patient can be anywhere in the US.
E. None of the above