

Short Portable Mental Status Questionnaire (SPMSQ)

Patient's Name: _____

Date: _____

Circle Appropriate SEX: *M* *F* RACE: *White* *Black* *Other*
Description: YRS OF EDUCATION: *Grade School* *High School* *Beyond High School*

Instructions: Ask questions 1 to 10 on this list and record all answers. (Ask question 4a only if the subject does not have a telephone.) All responses must be given without reference to calendar, newspaper, birth certificate, or other aid to memory. Record the total number of errors based on the answers to the 10 questions.

+	-	Questions	Instructions
		1. What is the date today? _____	Correct only when the month, date, and year are all correct.
		2. What day of the week is it? _____	Correct only when the day is correct.
		3. What is the name of this place? _____	Correct if any of the description of the location is given. "My home," the correct city/town, or the correct name of the hospital/institution are all acceptable.
		4. What is your telephone number? _____	Correct when the number can be verified or the subject can repeat the same number at a later time in the interview.
		4a. What is your street address? _____	Ask only if the subject does not have a telephone.
		5. How old are you? _____	Correct when the stated age corresponds to the date of birth.
		6. When were you born? _____	Correct only when the month, date, and year are correct.
		7. Who is the president of the United States now? _____	Requires only the correct last name.
		8. Who was president just before him? _____	Requires only the correct last name.
		9. What was your mother's maiden name? _____	Needs no verification; it only requires a female first name plus a last name other than the subject's.
		10. Subtract 3 from 20 and keep subtracting 3 from each new number, all the way down. _____	The entire series must be performed correctly to be scored as correct. Any error in the series—or an unwillingness to attempt the series—is scored as incorrect.

_____ **Total Number of Errors**

- 0 – 2 errors = *Intact Intellectual Functioning*
- 5 – 7 errors = *Moderate Intellectual Impairment*
- 3 – 4 errors = *Mild Intellectual Impairment*
- 8 – 10 errors = *Severe Intellectual Impairment*

(Allow one more error for a subject with only a grade school education. Allow one less error for a subject with education beyond high school. Allow one more error for African-American subjects, using identical educational criteria.)

Source:
Pfeiffer E. A short portable mental status questionnaire for the assessment of organic brain deficit in elderly patients. *J Am Geriatr Soc.* 1975;23(10):433-41.