

NVCL-R

Nijmegen-Venray Confabulation List - Revised

Name patient: _____

Name rater: _____

Relation with patient: _____

Date: _____

Instructions

Confabulating is talking about experiences or memories that are incorrect. It is not the same as lying: people who lie deliberately tell stories that are not true, but the patient who confabulates does not deliberately do this. The patient is often convinced of the truth of his/her story. This questionnaire was developed to measure spontaneous confabulations, that is, confabulations that the patient produces without a prompt or in reply to a specific question. Some of the questions do address provoked confabulations (in reaction to a question), but this is then specifically stated.

Every question has five possible answers. Please encircle the answer that is most appropriate for the behaviour of the patient at the time of completing the instrument. If you feel that none of the options are appropriate, please circle the first option:

There is space at the end for possible remarks or comments.

SPONTANEOUS CONFABULATIONS

1. Is the content of the confabulations realistic? Would someone who does not know the patient believe him/her (does the patient want to go out to work, or does (s)he tell you that (s)he has a meeting with the Queen?)
 0. The stories are realistic (if the context is not being taken into account)
 1. Some elements of the story do not seem to be plausible
 2. An outsider would have doubts about the truth of the story (meeting a famous person, being very rich)
 3. It is obvious that some elements of the story cannot be true
 4. The stories are very hard to believe
2. Does the patient tell you or others that (s)he has an appointment with others (family, doctor) when this is not the case?
 0. Never
 1. Rarely
 2. Sometimes
 3. Often
 4. (Almost) always
3. Does the patient tell you or others that (s)he had visitors who in fact never visited him/her?
 0. Never
 1. Rarely
 2. Sometimes
 3. Often
 4. (Almost) always
4. Does the patient see or hear things that are not present?
 0. Never
 1. Rarely
 2. Sometimes
 3. Often
 4. (Almost) always

5. Does the patient act upon his/her confabulations? Does (s)he for example walk to the door to wait for somebody or does (s)he get up during a conversation to take care of the dog?

- 0. Never
- 1. Rarely
- 2. Sometimes
- 3. Often
- 4. (Almost) always

6. How often does the patient act or want to act upon the confabulations?

- 0. Rarely to never
- 1. A few times a week
- 2. Almost daily
- 3. Several times per day
- 4. This happens almost continuously

Questions 7, 8, and 9 only need to be answered if at least one of questions 1 to 6 is rated with a score of 1 or higher. If questions 1 to 6 are all rated 0, continue to question 10.

SEVERITY OF SPONTANEOUS CONFABULATIONS

7. Does the patient confabulate spontaneously? Does (s)he spontaneously tell stories that are incorrect with respect to time and/or place?

- 0. Rarely to never
- 1. A few times a week
- 2. Almost every day
- 3. Several times a day
- 4. This happens almost continuously

8. How often does the patient spontaneously confabulate?

- 0. Rarely to never
- 1. A few times a week
- 2. Almost every day
- 3. Several times a day
- 4. This happens almost continuously

PROVOKED CONFABULATIONS

9. Can the patient be corrected when telling these stories?
0. Yes, the patient immediately assumes that (s)he is incorrect
 1. Yes, it only takes a little persuasion to convince the patient that (s)he is mistaken
 2. Sometimes, the patient occasionally sticks to his/her conviction
 3. Usually not, only confronting him/her with the incorrectness of a story results in reconsideration (e.g., an outside temperature of 25°C when the patient states that it is winter)
 4. no, the patient cannot be convinced of the reality and reacts negatively on efforts to do so.
10. Does the patient recognizes acquaintances correctly?
0. Yes, always
 1. Often
 2. Sometimes
 3. Rarely
 4. No, never
11. When the patient is being asked about the reason for admittance, does he/she respond correctly?
0. Yes, always; the patient responds correctly where he/she is and why
 1. Often
 2. Sometimes
 3. Rarely
 4. No never; the patient does not know where (s)he is and why
12. When the patient is being asked what (s)he did yesterday, does (s)he answer correctly?
0. Yes, always
 1. Often
 2. Sometimes
 3. Rarely
 4. No, never

13. When the patient is being asked about plans for the day or the next weekend, does the patient answer correctly?
0. Yes, always
 1. Often
 2. Sometimes
 3. Rarely
 4. No, never
14. Is the patient capable of remembering things, such as names of other patients or appointments?
0. Yes, (s)he can do this without problems
 1. Fairly, it is sometimes necessary to repeat things
 2. So-so, information must be presented several times
 3. Poorly, only names of patients which whom (s)he is in frequent contact will be remembered
 4. Very poorly, the patient does not seem to profit from repetition and names of other patients are not remembered

Check the box if the patient can answer the questions from items 15 and 16 correctly.

15. Is the patient oriented to time?
- ☐ What is the year?
 - ☐ What is the month?
 - ☐ What is the date?
 - ☐ What is the day of the week?
16. Is the patient oriented to place?
- ☐ In which province are we?
 - ☐ In which place are we?
 - ☐ In which hospital/institution are we?
 - ☐ On which level are we?

DISTORTED SENSE OF REALITY

17. Does the patient believe to be somewhere else than where (s)he actually is?
- 0. Never
 - 1. Rarely
 - 2. Sometimes
 - 3. Often
 - 4. (Almost) always
18. Does the patient show incorrect familiarity ('recognize' strangers, or mistake people for someone else)?
- 0. Never
 - 1. Rarely
 - 2. Sometimes
 - 3. Often
 - 4. (Almost) always

Comments

Scoring

There are five possible answers per question. Please encircle the number in front of the description which represents the behavior of the patient best. The encircled numbers can be summed to form category scores. There are four category scores: 1) spontaneous confabulation 2) severity of spontaneous confabulation 3) provoked confabulation and 4) distorted sense of reality.

1. The category *spontaneous confabulation* consists of items: 1, 2, 3, 4, 5, and 6. The minimum score for spontaneous confabulation is 0, and the maximum score is 24 (a score of 4 on each of the previously mentioned items).

2. The category *severity of spontaneous confabulation* consists of items: 7, 8 and 9. The minimum category score is 0 and the maximum category score is 12.

3. The category *provoked confabulation* consists of items: 10, 11, 12, 13, 14, 15, and 16.

Scoring for items 15 and 16: 4 minus the correct number of answers. For example: A patient can correctly tell the year (1 point), but not the month (0 points), the date (0 points) or day of the week (0 points), the score for item 15 is $(4-1) = 3$.

The minimum score for provoked confabulations is 0 and the maximum category score is 28.

4. The category *distorted sense of reality* consists of items: 17, and 18. The minimum category score is 0 and the maximum category score is 8.

Note: All items are positively keyed, there are no reversed items.

A category score indicates how often behavior from this category is observed. The higher the score, the more spontaneous/provoked confabulation behavior are observed. For example: Patient A is awarded a score of 2 on the *spontaneous confabulation category* and Patient B is rewarded a score of 18. This indicates that patient B expresses more spontaneous confabulation behavior than patient A.

SPON	1-6	
SEV	7, 8, 9	
PROV	10-16	
REA	17, 18	