FRONTAL BEHAVIORAL INVENTORY (FBI) (Admin Guide p 3)

NAME: ___________________________ AGE: ___ DIAGNOSIS: ___________ DATE: ______________
CAREGIVER: ______________________ EXAMINER: ______________________

Explain to the caregiver that you are looking for a change in behaviour and personality. Ask the caregiver these questions in the absence of the patient. Elaborate if necessary. At the end of each question, ask about the extent of the behavioural change, and then score it according to the following: 0 = none, 1 = mild, occasional, 2 = moderate, 3 = severe, most of the time.

1. Apathy: Has s/he lost interest in friends or activities or is s/he interested in seeing people or doing things?
   ______

2. Aspontaneity: Does s/he start things on his/her own, or does s/he have to be asked?
   ______

3. Indifference / Emotional Flatness: Does s/he respond to occasions of joy or sadness as much as ever, or has s/he lost emotional responsiveness?
   ______

4. Inflexibility: Can s/he change his/her mind with reason or does s/he appear stubborn or rigid in thinking lately?
   ______

5. Disorganization: Can s/he plan and organize complex activity or is s/he easily distractible, indecisive, or unable to complete a job?
   ______

6. Inattention: Does s/he pay attention to what is going on or does s/he seem to lose track or not follow at all?
   ______

7. Personal Neglect: Does s/he take as much care of his/her personal hygiene and appearance as usual, or does s/he neglect to wash or change his/her underwear?
   ______

8. Loss of Insight: Is s/he aware of any problems or changes in behaviour, or does s/he seem unaware of them or deny them when discussed?
   ______

9. Logopenia: Is s/he as talkative as before or has the amount of speech significantly decreased?
   ______

10. Aphasia and Verbal Apraxia: Does s/he make language or pronunciation errors or has s/he developed stuttering or grammatical errors recently?
    ______

11. Comprehension (Semantic) deficit: Does s/he ask what words mean, has trouble comprehending words, and/or objects, or does s/he know the meaning of words?
    ______

12. Alien Hand and/or Apraxia: Has s/he developed clumsiness, stiff hand, inability to use utensils or appliances, or does a hand interfere with the other, or behaves as if it did not belong, or can s/he use both hands as before?
    ______

________ Negative Behavior Score Total of 1 – 12

NAME: ___________________________ DATE: ______________
13. Perseveration, Obsessions (Stereotypy): Does s/he repeat or perseverate actions or remarks? Are there any obsessive routines or behaviours, or has s/he always been a creature of habit?

14. Hoarding: Has s/he started to hoard objects or money excessively or has her/his saving habits remained unchanged?

15. Inappropriateness: Has s/he kept social rules or has s/he said or done things outside what are acceptable? Has s/he been rude, or childish?

16. Excessive jocularity: Has s/he been making jokes excessively or offensively or at the wrong time, or has s/he always had a jocular manner or a quirk sense of humor?

17. Poor Judgment and Impulsivity: Has s/he been using good judgment in decisions, spending or driving, or has s/he acted impulsively, irresponsibly, neglectfully or in poor judgment?

18. Restlessness / Roaming: Has s/he been roaming, pacing, walking, driving excessively or is the activity level normal?

19. Irritability: Has s/he been irritable, short-tempered, or is s/he reacting to stress or frustration as s/he always had?

20. Aggression: Has s/he shown aggression, or shouted at anyone or hurt anyone physically, or is there no change in this respect?

21. Hyperorality/food fads: Has s/he been drinking or eating excessively anything in sight, or developing food fads, a sweet tooth, eating bananas or cookies excessively, or even putting objects in his/her mouth, or has s/he always had a large appetite and the eating habits have not changed? Has s/he lost table manners?

22. Hypersexuality: Has sexual behaviour been unusual or excessive? This could include remarks or undressing, or is there no change in this respect?

23. Utilization Behaviour: Does s/he seem to need to touch, feel, examine, or pick-up objects within reach and sight, or can s/he keep his/her hands to him/herself?

24. Incontinence: Has s/he wet or soiled hi s or herself, or does s/he have problems that can be explained by urinary infection or childbirth/prostate?

The scoring is intended to capture severity rather than the frequency of abnormalities.

Disinhibition Score Total of 13-24

Cutoff score of 30 distinguishes FTD from other degenerative dementias

The caregiver may have a tendency to discuss behaviours that are not related to the questions asked. Although flexibility is desirable, and extra information may be useful, caregivers should be reoriented towards the item by saying, for example, “We were discussing apathy” and then repeating the scripted question. It is advisable to encourage the caregiver, and only if the caregiver does not understand the question should the interviewer for example be suggestible; while deviation from the scripted question may be necessary, it should be avoided in general, as it leads to a great deal of extraneous material being discussed.