

**Electronic Supplementary Material 4 - Illustrative example for the application of the base rates**  
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**Considering the base rates of low performance in cognitively healthy older adults improves the accuracy  
to identify neurocognitive impairment with the Consortium to Establish a Registry for Alzheimer's  
Disease-Neuropsychological Assessment Battery (CERAD-NAB)**

Panagiota Mistridis<sup>1,2</sup>, Simone C. Egli<sup>1,2</sup>, Grant L. Iverson<sup>3,4</sup>, Manfred Berres<sup>5</sup>, Klaus Willmes<sup>6</sup>, Kathleen A.  
Welsh-Bohmer<sup>7</sup>, Andreas U. Monsch<sup>1,2\*</sup>

<sup>1</sup>Memory Clinic, Felix Platter Hospital, University Center for Medicine of Aging Basel, Schanzenstrasse 55,  
4031 Basel, Switzerland

<sup>2</sup>University of Basel, Department of Psychology, Missionsstrasse 60/62, 4055 Basel, Switzerland

<sup>3</sup>Department of Physical Medicine and Rehabilitation, Harvard Medical School

<sup>4</sup>Red Sox Foundation and Massachusetts General Hospital Home Base Program, Boston, MA 02114, USA

<sup>5</sup>Department of Mathematics and Technology, University of Applied Sciences Koblenz, Joseph-Rovan-Allee 2,  
53424 Remagen, Germany

<sup>6</sup>Section Neuropsychology, Department of Neurology, RWTH Aachen University, Pauwelsstraße 30, 52074  
Aachen, Germany

<sup>7</sup>Joseph and Kathleen Bryan Alzheimer's Disease Center, Duke University, 2200W Main Street, Suite A200,  
Durham NC 27705, USA

\*Correspondence concerning this article should be addressed to:

Andreas U. Monsch, Memory Clinic, Felix Platter Hospital, University Center for Medicine of Aging Basel,  
Schanzenstrasse 55, 4031 Basel, Switzerland

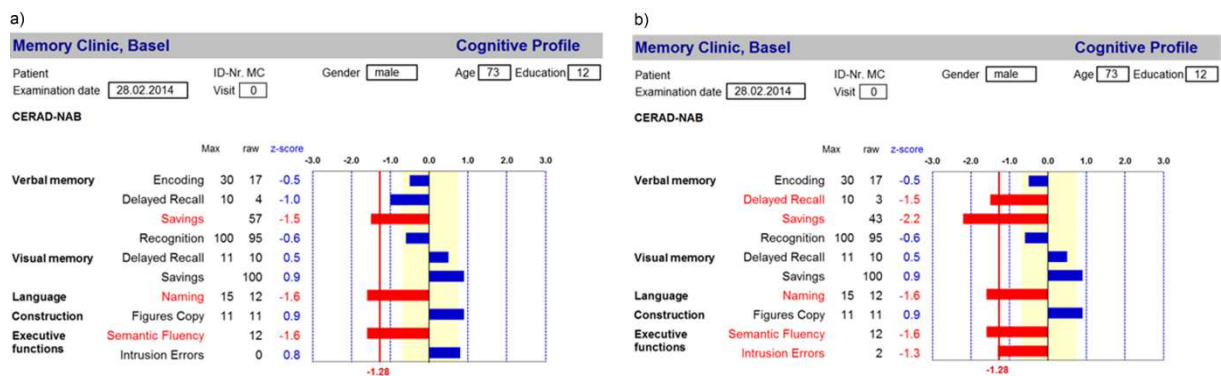
Phone: +41 61 265 31 93

Fax: +41 61 265 37 94

E-Mail: [Andreas.Monsch@unibas.ch](mailto:Andreas.Monsch@unibas.ch)

### Illustrative example for the application of the base rates (see Fig. 2)

To illustrate the application of these base rates and Fig. 2, a 73-year old man with 12 years of education was administered the CERAD-NAB. His results (i.e., demographically adjusted  $z$ -scores) show that 3 of 10 scores were below  $z = -1.28$ . Because 18.4 % of the normative sample had 3 or more of the 10 variables below  $z = -1.28$  (see Fig. 2), the patient's performance would be considered to be *within normal limits*. However, if the patient would have had 5 of 10 scores below  $z = -1.28$ , his performance would have been considered to reflect *probable cognitive impairment*, because only 4.8 % (see Fig. 2) of the normative sample performed worse. Thus, watchful waiting and a follow-up examination within the following years would be critical for this patient to ensure cognitive stability.



**Fig. S3** Hypothetical CERAD-NAB profiles (demographically adjusted  $z$ -scores) of a 73-year old patient obtaining a) three low scores or b) five low scores when using a cut-off score of  $z = -1.28$ . Incorporating the base rates (see Fig. 2), situation a) would be interpreted as *within normal limits* (base rate = 18.4 %; Fig. 2), whereas situation b) would be judged as *probable cognitive impairment* (base rate = 4.8 %; Fig. 2). The shaded yellow area represents the 25th percentile ( $z = \pm 0.67$ )