

Imaging Dementia-Evidence for Amyloid Scanning Study Forms (IDEAS) (version March 31, 2015)

ELIGIBILITY CONFIRMATION FORM

(to be completed with each new referral)

I certify that all of the following are correct:

- The patient is a Medicare or Medicare Advantage beneficiary.
- The patient has had a verified diagnosis of MCI or dementia for longer than 24 months.
- The patient meets AUC for amyloid PET (all must be checked):
 - Cognitive complaint verified by objectively confirmed cognitive impairment
 - The etiologic cause of cognitive impairment is uncertain after a comprehensive evaluation by a dementia expert.
 - Alzheimer's disease is a diagnostic consideration.
 - Knowledge of amyloid PET status is expected to alter diagnosis and management.
- The patient does not meet any of the exclusion criteria:
 - Normal cognition or subjective complaints that are not verified by cognitive testing.
 - Knowledge of amyloid status, in the opinion of the referring dementia expert, may cause significant psychological harm or otherwise negatively impact the patient or family.
 - Scan is being ordered solely based on a family history of dementia, presence of apolipoprotein E (APOE) ϵ 4, or in lieu of genotyping for suspected autosomal mutation carriers.
 - Scan being ordered for nonmedical purposes (e.g., legal, insurance coverage or employment screening).
 - Cancer requiring active therapy (excluding non-melanoma skin cancer);
 - Hip/pelvic fracture within the 12 months prior to enrollment;
 - Weight greater than that allowable by the PET table;
 - Life expectancy less than 24 months based on medical co-morbidities.
- The patient has had a head MRI and/or CT within 24 months.
- The patient has had an appropriate clinical laboratory assessment (minimum: CBC, standard blood chemistry profile, TSH, vitamin B12) within 12 months.
- The patient is expected to be able to tolerate amyloid PET imaging.
- **Informed consent has been obtained from the patient or designated surrogate/proxy.**