

ALZHEIMER'S - B₂P

[illegible]

AURELIO VALERIO
Version 4

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EDICIÓN GLOBAL



Hobbitar: chess, pedal and philosophy among others

Aurelio Valerio serves as the principal author of the publishing house Molwick.

Over more than two decades, Molwick's books have received more than 40 million visitors and exceeded two million PDF downloads, making him one of the most widely read scientific essayists in Spanish in the new millennium.

During the most dynamic years of the early web, there were more than 10,000 external links pointing to Molwick's website (data verifiable via the Wayback Machine). These links originated from universities, academic projects, teachers' blogs, educational specialists, and science communicators. In many cases, they appeared alongside references to Wikipedia or National Geographic pages, reflecting the diversity of contexts in which his work was cited.

His earlier work includes the Global Cognitive Theory, published in five languages and focused on the functional foundations of human thought. This body of work forms part of the author's historical corpus and will be updated within his current conceptual framework.

Today, Aurelio Valerio develops the Synthetic Theory of Neuronal Dysfunctions, a functional and human-centered approach to Alzheimer's disease, vascular dementia, frontotemporal dementia, and Parkinson's disease, aimed at understanding brain alterations from an integrative perspective.



The only antidote for the egocentrism
of pure reason is Love

RESOURCES AND DOWNLOADS

Aurelio Valerio

Title:

[Dynamic Assessment Alzheimer's B2P](#)

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GGKEY:RPQ0ATA04W8

RELATED BOOKS:

Title:

[Alzheimer's Back to the Present](#)

Edition 5.^a © Copyright 11-12-2025

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- - -

Title:

[Memory, Language, and Other Brain Abilities](#)

3rd edition © Copyright October 2016 (2025)

ISBN: 978-84-15328-16-2

- - -

Title:

[Global Cognitive Theory](#)

3rd edition © Copyright October 2016

ISBN:978-84-15328-73-5

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[Brain and Modern Computers](#)

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CAVEAT

It is essential to note that, while this hypothesis is compelling, it remains pending controlled trials and further **studies**. However, implementing present-moment focus does not appear to pose any inherent risk of harm.

Pyramidal Model of Alzheimer's Causality

This proposal describes the underlying causes of recent memory difficulties and goes beyond conventional explanations. Just as a sedentary lifestyle—such as spending the whole day on the couch—can lead to arteriosclerosis in the medium or long term, Alzheimer's is presented here through a three-level model:

1. Preliminary Stage (Error of Conduct)

- Excessive focus on the past or on parallel universes (cognitive overload of short-term memory). If the denaturalization of the relationship between short- and long-term memories is corrected, progression to the next phase will likely not occur.
- Disconnection from the current environment (prolonged daydreaming, excessive consumption of non-current content).
- Inappropriate use of cognitive capacities (chronic and maladaptive use of mental resources) that leads to physiological dysfunctions.

2. Possible diagnoses of Alzheimer's.

The behavioral core manifests through patterns that prevent the consolidation of recent information. This persistent cognitive disruption favors the progressive increase of physiological dysfunctions.

This second level corresponds to the traditional clinical classification of Alzheimer's, understood here because of the hidden prior behavioral disease.

3. Advanced Alzheimer's (severe physiological disease)

- Neurochemical alterations.
- Inflammatory processes.
- Metabolic dysfunctions

Potential for Reversal (returning to the present)

Conduct that aligns with the functional nature of the Global Memory System may constitute a highly effective preventive measure. Furthermore, the new theory suggests the potential for a slow reversal of the condition in cases that are not very advanced.

TEMPLATES

DYNAMIC ASSESSMENT

ALZHEIMER B²P FRAMEWORK

INTRODUCTION

These templates are an essential companion to my book *Alzheimer's Return to the Present*.

The central node of the theory presented in the book “Alzheimer’s Return to the Present”, which underpins the current self-assessment methodology, consists of establishing as the **principal or sole cause of Alzheimer’s the tendency to dwell excessively on the past or on daydreams** resembling parallel universes as the principal or sole cause of Alzheimer’s, leaving other related causes merely as accelerators.

This book is a deepening of my earlier works from 2002 to 2013, 2016, and 2019, titled *Memory, Language, and Other Brain Abilities*, also available through exact research, and, likewise, *The Global Cognitive Theory*, which talks about the brain in general, intelligence, memory, and the will.

These quantitative templates **are not intended to diagnose or medically classify**. They serve as a tool for personal observation, designed to support the process of readjusting to the normal functioning of the **Global Memory System (GMS)** by restoring **short-term memory (STM)** functionality. They help raise awareness of two key issues: **the overreliance on long-term memory** and the lack of “presence”—the abandonment of the physical, emotional, or rational present—and, in turn, the effects produced and their quantitative evolution.

These templates do not cover all factors or indicators of GMS health or the various types of memory. However, we believe they are sufficient to provide precise indicators of progress and functionality, and to effectively drive a **strong readjustment, including substantial reversal**, within a relatively short period: 3 to 6 months in the **early stage and, if possible, roughly double that in the middle stage**. These timeframes are approximate and currently based on personal estimates.

Another critical point is that certain everyday behaviors or events, while harmless in themselves, must be taken **very seriously and avoided when a person is affected by Alzheimer’s**.

Before analyzing the templates in detail, it’s important to note:

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IF ONE DOES NOT STOP THINKING ABOUT THE PAST OR ALTERNATIVE WORLDS OUTSIDE REALITY

The templates will yield poor results. Caution is advised when reading long novels and watching TV series—unless they significantly improve social relationships.

The reality is that the proposed prevention of Alzheimer's is so elementary that, if true, it seems almost impossible to believe. It remains only to add that the cost is zero.

The immediate objective is to confirm it experimentally. Nevertheless, it seems almost inconceivable that any person with Alzheimer's would claim not to have reflected extensively on the past or not to have frequently experienced daydreams.

The book cited above includes several additional elements regarding the scientific evidence of the mentioned theory, among them the proposal for an econometric study using Ordinary Least Squares (OLS) regressions or similar methods.

It should be noted that other problems, such as stress, chronic lack of sleep, and alcoholism, can present the same symptoms as the initial stage, and, for example, stress does not appear to cause Alzheimer's.

The 3rd stage, advanced or Alzheimer's amyloidosis, is different as it involves an additional physiological cause. In such cases, not only must this cause disappearance, but—ideally—there must also be enough time for the accumulated physiological effects to be eliminated.

Let us now explore the purpose, value, and wonders of these templates:

1. Objectives and Effectiveness of the Templates

Completing the templates provides instruction on the functioning of the Global Memory System (GMS), as the recording of its events requires the attention and vigilance of its components.

It should be emphasized that virtually **all the events** subject to recording are indicated, in one way or another, by the **doctrine generally accepted** in publications on Alzheimer's disease.

The novelty lies in its comprehensive vision and analysis to obtain quantitative indicators, and in the fact that this process simultaneously serves as a powerful instrument for returning to the present.

From another perspective, the templates evaluate both the events in which intervention is possible and the automatic events in the GMS, all of which contribute to the global indicators that will reveal personal progress.

Recognizing the principal cause, along with the auxiliary or accelerating ones, their impact, and the possibility of reducing them will encourage continued progress along the path.

If the **effects are reduced**, it will be because we are more attentive to the present, and short-term memory (STM) will be less saturated, under less pressure from long-term memory (LTM)— “where the past usually resides”—; the Global Memory System (GMS) will gradually and automatically readjust.

Over time, a surprising and delightful result will occur: one of the events for which intervention is not possible will improve its evaluation, implying that the GMS is adjusting itself automatically.

Once the GMS resumes proper functioning, this methodology will have fulfilled its mission, and the templates will no longer be necessary. In fact, in the first stage, the templates are not considered critical, but it is advisable to know them as a methodological guide.

2. Monitoring and the Value of Assessment.

For any indicator of the principal cause or its accelerators, the optimal value is zero, since they exert a harmful effect; the value is indicated in the template.

The indicators will be zero when the effects or the causes do not exist or are not detected. Except for a few values in the General Events template, all are marked by default with the value indicated by:

● 10 points.

* 5 points.

Therefore, the events related to the cause, the accelerators, and the observed effects can be jointly aggregated into a global estimator for any time.

To simplify its completion, **two methods** have been designed according to the phase we are in:

✓ **1st phase:** If we are in the stage before Alzheimer's proper, the few **errors** that will be present should be circled with the **(O) mark**.

✓ **2nd phase:** The double **mark (O)** should be placed on the few **correct responses** that are obtained. Important: a correct response should not be marked if there is any uncertainty that an error has not been made.

In any case, in the second phase, given the state of memory, it will generally be **the caregivers** who are responsible for completing or supervising the entries on the templates.

Logically, only the errors committed will be totaled in both phases. **In the first phase, they will be marked with (O) and, in the second, "Not" marked.**

In this way, with equal numbers of errors and correct responses, the averages will be evaluated the same in both phases.

Events that will not change for quite some time can be **noted directly on the weekly average**.

The aggregated indicators of the weekly, monthly, quarterly, or semi-annual average will have greater reliability the longer the period, because their standard deviations will be smaller. Put another way, the aggregated indicators are excellent because the errors of the individual indicators tend to compensate for one another across the different recorded time periods.

Conversely, the progression of Alzheimer's disease, its stages, and their relationship to the possible quantification of these templates' results will undoubtedly aid in personalizing these templates in the future, hopefully in the near term.

3. The Wonder of These Templates.

The brain's functioning is largely automatic.

The daily workload involved in completing the templates is, at the same time, the **principal mechanism for remaining attentive to the present.**

Subsequent completion will have a significant effect, as it requires monitoring for unwanted events throughout the day to improve results. Thus, it becomes a challenge, a kind of game, in which it is less appealing to dwell too much on the past.

Likewise, adaptation will not be immediate; at the beginning, it is advisable to **focus on improving one or two of the events** that can be addressed with the solution proposed in the templates or a similar one. Over time, this repetition triggers a short-term memory response because it is automatic. Once achieved, expand monitoring to more events.

The likely gradual reduction in overall results will encourage maintaining the effort made, especially when some indicators improve that cannot be directly monitored and are due to the strengthening of the Global Memory System (GMS).

Changing the subject, speaking of accompaniment, if you have companions or caregivers, please ask them to complete the template as well, so you can compare and even achieve better results than they do.

In this case, you may let them know you have already noticed something unusual.

It is recommended that the template be completed consistently, without pressure or perfectionism. It may be completed by the individual or by caregivers; it is sufficient to record what is perceived. **The most critical aspect is not the data themselves but the process and progress.**

If it is not completed on a given day or week, that is perfectly acceptable; however, the corresponding average must be adjusted to allow the series' evolution to be understood. For example, if one day of the week is missing, the weekly total would be divided by 6 rather than 7.

Given that the new theory could be practical in general, it would be desirable to discuss it within Alzheimer's-related groups and associations so that many people may adopt it and, if applicable, **confirm it as soon as possible**, which is essential given its profound effects. According to the **World Health Organization, each month, more than 800,000 new cases of dementia are recorded worldwide, of which 60 to 70 percent correspond to Alzheimer's disease.**

At present, this theory has not been confirmed beyond a specific case; the templates are essential because they will allow verification of whether, in general, they produce a substantial improvement. For this reason, it is requested that the global templates

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covering a minimum of three months be submitted by email to “**alzheimer.vap@gmail.com**”, so that their validity may be assessed and broader, controlled studies justified, with **due urgency**.

Finally, it should once again be emphasized that “The essential and innovative element of the present proposal, in relation to the general culture on Alzheimer’s, is the proposal to STOP THINKING ABOUT THE PAST OR ABOUT PARALLEL UNIVERSES of any kind, since we consider that this is **the sole and true cause of the disease**, and all other factors are merely accelerators or brakes on the effect upon the natural functioning of the Global Memory System (GMS).”

In other words, **if one does not return to the present in a broad sense, the effects of these templates will be limited.**

There may be too much insistence on the present and the templates. Still, from personal experience, it is not easy to change habitual behavior when one is not even aware of the errors one is committing.

Of course, if habitual behavior improves without relying on the templates, the positive effect will be equally significant.

It should be noted that our **internal time counter** leaves much to be desired when we are not in the present; for example, while sleeping, watching a movie, reading a book or novel, or thinking about the past.

INSTRUCTIONS FOR USE

It does not matter whether one completes a single page or three: fill in as much as you wish. At the beginning, it is even possible to start with just one section.

Naturally, during the first weeks, mastery will be gained in detecting the sections of the templates. They may vary somewhat, but only a reasonable degree of personal consistency is required.

Everyone is different, and the speed of adjustment depends on many factors. This represents “**another way of living.**”

Ideally, all sections should be completed as soon as possible, even with some errors, to gain a clear picture of what is truly intended and of the progress achieved.

The indicators are designed so that the **maximum sum of each possible event** in the template for a day, a week, a month, or any period **is 100**. In this way, analyzing the results and their evolution becomes highly intuitive.

Weekly data are obtained as **the average** of the scores from the days of the week, without decimals, rounded to the nearest integer; thus, the evolution of the indicators will be observed with greater clarity.

Whenever possible, these sums should be treated as a daily exercise in elementary mathematics and, preferably, performed without the aid of a calculator.

One or more free rows exist for events and personal information, which will not be included in the results to maintain the uniformity of the templates received.

Monthly, quarterly, and semiannual templates **will always refer to the average** of their weeks or months within the period considered, calculated like the weekly template, thereby facilitating comparisons.

Provided that **attention is maintained** throughout the week, and similar results are observed, one may begin to fill in two days of the weekly template after a month or a quarter to relieve the tension of completing the templates. Alternatively, one could complete only the full template of the last week of each month and use it as the monthly average.

The indicators should decline clearly if the temporal evolution is favorable, reflecting the work accomplished through the indirect readjustment of the Global Memory System (GMS) in its major components, such as working memory (WM), short-term memory (STM), and medium-term memory (MTM).

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What is most relevant is to be aware of the imperfectly carried out events and to have the will to work toward reducing them as much as possible. As always, to improve results, the templates may be completed again every day and every week, or even out of habit.

Finally, mention must be made of the indicator “**Excuses born of the soul,**” present in the templates for all types of memory. It refers to the excuses we make for the errors we commit, telling ourselves that they are normal, that we were thinking of something else, that we were tired, that we were in a hurry, and so forth. These are the ego's excuses to avoid acknowledging mistakes.

This indicator is associated with the indicators of each type of memory. The theory holds that **the abuse of excuses is the first sign that something is wrong with the Global Memory System.** Consequently, it must be taken very seriously and reduced whenever there is suspicion of a memory problem.

Personal Data Template.

This template is intended in case, at the conclusion of your effort, the outcome—whether favorable or not—might serve to assist other individuals, and you decide to send it along with the monthly or semiannual templates. Any submission, including the data to be included, is **entirely optional.**

Personal data may help interpret the results more accurately in each situation. It would only need to be sent once, always voluntarily. In subsequent templates that you choose to submit, it will suffice to include the alphanumeric reference and the date of the last period covered in the accumulated templates prepared for this purpose.

It would be particularly beneficial to know this as soon as possible by sending the first quarterly template, so that more evidence may be gathered and, if the results are positive, more individuals may be encouraged to follow this method.

It would be sufficient to send the .doc files or images of the templates to the following Google email address: **alzheimer.vap@gmail.com.**

It would be gratifying to draw a valid conclusion within a few months.

Thank you very much for your collaboration, and best of luck!

Weekly Template

For each indicator, calculate the weekly average as previously indicated, using the 1st- or 2nd-phase method.

If intensive work is undertaken, each recordable event should be noted directly in the corresponding indicator for that day (we must not risk forgetting it).

The outstanding excellence of this system, beyond facilitating the tally, is that it will foster more profound reflection on what has occurred, and **the brain's tendency not to repeat it will be greater.**

If an event is about to occur but is reflected just beforehand and is not committed, it should not be recorded. Such precautions or double-checks significantly help increase presence in daily activities.

The weekly total will be the vertical sum of the indicators' averages.

Monthly Template

For each indicator, there is a column corresponding to each of the four weeks of the month. The remaining individual days of the month are left as rest days.

This structure serves to observe both the weekly evolution and the “Weekly Average within the Month,” which, for each indicator, reflects the mean of the four weeks (the total divided by 4).

Consequently, the monthly average will have a dimension like days, the weekly averages, since it is itself an average of them (maximum 100), thereby facilitating comparison.

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Quarterly (or Semiannual or Annual) Template

For each indicator, the values from the “Average” column corresponding to the months will be included.

The quarterly “Average” column will be the sum of the three months divided by three, thereby maintaining the same dimension for comparative purposes.

If desired and the weekly values do not show significant variation, one may discontinue completing the weekly templates and instead complete only the final week of each month (with its 7 days). This will also serve as monthly data for the quarterly or semiannual templates.

In such cases, vigilance regarding **presence** must not diminish. That is, this approach may be adopted once the appropriate behavior has been integrated and is maintained during the period without templates.

It must be remembered how severe Alzheimer’s is. If the intermediate templates are abandoned and evolution worsens, it would be advisable to resume completing all of them.

General Events Templates

A template of events has also been added that affects the entire Global Memory System (GMS), allowing us to observe how they relate to the results of each memory type in each period.

PERSONAL DATA AND STUDY VARIABLES



Name and surname (optional) _____

Ref. Alphanumeric (20 charact.) _____ (In all templates)

Age: _____ Gender: ☐ Female ☐ Male Email: _____

City/Town: _____ Country: _____

Do you live alone? ☐ Yes ☐ No

Type of housing: ☐ Owned ☐ Rented ☐ Care home ☐ Institutionalized

People you live with: ☐ Alone ☐ Partner ☐ Family ☐ Caregiver

Access to support networks: ☐ Family ☐ Neighbors ☐ Associations ☐ None

Education level: ☐ Basic ☐ Intermediate ☐ University ☐ Technical University

Profession (current or previous)

 Lifestyle and Habits

Daily physical activity (7000 steps / 4 km) ☐ Yes ☐ No

Diet: ☐ Balanced diet ☐ High in ultra-processed foods

Alcohol consumption: ☐ Yes ☐ No Tobacco use: ☐ Yes ☐ No

Technology use: ☐ Computer ☐ Mobile ☐ social media

 Health and Medical History

●●●● Previous diagnosis of Alzheimer's or dementia: ☐ Yes ☐ No

●●●● Date: _____ Type: _____

Family history of dementia: ☐ Siblings ☐ Parents ☐ None

Chronic illnesses: ☐ Diabetes ☐ Hypertension ☐ Depression



Personal Observations:

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Ref: _____ End Date ____-____-____

☐ MONTHLY (4 weeks) ☐ SEMIANNUAL (6 months)

GLOBAL SUMMARY – WM – WORKING MEMORY

INDICATOR \\ Periods	1	2	3	4	5	6	Average
● Excuses born of the soul							
● I don't know whether the weekday or the month day upon waking.							
● I don't know what relevant day things are when I wake up							
● I'm going to do something and suddenly forget what it is.							
● I have misplaced an item.							
* I do not recall my next task.							
* I struggle with basic numerical calculations.							
* I struggle to explain simple ideas.							
* I have difficulty maintaining focus on tasks.							
* I felt my attention drifting easily.							
* I had difficulty following a conversation							
* I repeated questions or phrases without realizing it.							
* Leaving a light on							
* I'm afraid of long trips (e.g., by plane) or driving.							
* I do not know if I have completed an action.							
TOTAL PERIOD (Max. 100)							

Personal observations:

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Ref: _____ End Date ____-____-____

☐ MONTHLY (4 weeks) ☐ SEMIANNUAL (6 months)

GLOBAL SUMMARY – STM – SHORT-TERM MEMORY



INDICATOR \ \ Periods	1	2	3	4	5	6	Average
● Excuses born of the soul							
● Not knowing the day of the week or the month							
● When I don't know something, my brain tells me it doesn't know and doesn't know where to look.							
● Not opening the correct kitchen cabinet door when...							
● I have forgotten essential appointments or taken a pill.							
* I don't remember what I had eaten the day before.							
* I haven't left something somewhere, or it wasn't in its place.							
* I had difficulty locating fewer usual objects							
* I find it difficult to remember whether I have had a conversation.							
* Reading books, novels, or doing complicated crosswords.							
* Watching TV series							
* I had difficulty recognizing familiar names.							
* I had difficulty recognizing familiar faces.							
* Looking at the same place many times to find something.							
* Error in identifying the location of a recent event.							
TOTAL PERIOD (Max. 100)							

Personal observations:

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Ref: _____ End Date ____-____-____

☐ MONTHLY (4 weeks) ☐ SEMIANNUAL (6 months)

GLOBAL SUMMARY – MEDIUM-TERM AND SPECIAL MEMORIES

INDICATOR \\ Periods	1	2	3	4	5	6	Average
● Excuses born of the soul							
● Disorientation in familiar places							
● I'm afraid of getting lost in unfamiliar places							
● I don't remember streets well							
● I can't find the word I'm looking for or need							
● Difficulties with people's names							
● I do not remember the lyrics of a song I once knew.							
● I don't recognize faces							
● I struggle with non-basic numerical calculations							
● I have forgotten why I kept an object of symbolic value.							
TOTAL PERIOD (Max. 100)							

Personal observations:

[Escriba aquí]

Ref: _____ End Date ____-____-____

☐ MONTHLY (4 weeks) ☐ SEMIANNUAL (6 months)

GLOBAL SUMMARY – GENERAL EVENTS

INDICATOR \\ Periods	1	2	3	4	5	6	Average
REFLECTING ON THE PAST. Frequently or over an extended duration. (Máx. 40)							
STRESS (Máx. 20)							
-SOCIAL INTERACTION (Máx. 15)							
-SLEEP (Máx. 5)							
-ALCOHOL (Máx. 5)							
-TOBACCO (Máx. 5)							
-GENERAL HEALTH (Máx. 4)							
-Physical exercise 7000 steps daily (Máx. 3)							
-Hydration 2 liters per day (Máx. 3)							
TOTAL PERIOD							

Personal Observations:

[Escriba aquí]

Ref.: _____ End Date ____-____-____

GLOBAL SUMMARY BY SUBJECTS



YEAR - MONTH - WEEK	WM	STM	EM	GE	TOTAL
- -					
- -					
- -					
- -					
- -					
- -					
- -					
- -					
- -					
- -					
- -					
- -					
- -					
TOTAL PERIOD BY SUBJECT					

Personal Observations:

WEEKLY**ASSESSMENT – WM – WORKING MEMORY**

INDICATOR	M	T	W	T	F	S	U	Av .	POSSIBLE SOLUTION
● Excuses born of the soul	●	●	●	●	●	●	●		Accepting the mistakes
● I don't know whether the weekday or the month day is upon waking.	●	●	●	●	●	●	●		See STM. It will load automatically into WM.
● I don't know what relevant day things are when I wake up.	●	●	●	●	●	●	●		Think about them several times during the previous day.
● I'm going to do something and suddenly forget what it is.	●	●	●	●	●	●	●		GMS - Increase "presence."
● Have misplaced an item	●	●	●	●	●	●	●		Maintain focus on any task.
* I do not recall my next task.	*	*	*	*	*	*	*		GMS
* I struggle with basic numerical calculations.	*	*	*	*	*	*	*		Practice sometimes
* I struggle to explain simple ideas.	*	*	*	*	*	*	*		GMS
* I have difficulty maintaining focus on tasks.	*	*	*	*	*	*	*		GMS
* I felt my attention drifting easily.	*	*	*	*	*	*	*		GMS – Simulate drifting & returning several times a day
* I had difficulty following a conversation.	*	*	*	*	*	*	*		GMS Patience
* I repeated questions or phrases without realizing it.	*	*	*	*	*	*	*		GMS – Perhaps repeat the error to provoke awareness.
* Leaving a light on	*	*	*	*	*	*	*		GMS - Increase "presence."
* I'm afraid of long trips (e.g., by plane) or driving.	*	*	*	*	*	*	*		GMS
* I do not know if I have completed an action.	*	*	*	*	*	*	*		GMS
TOTAL PERIOD (sum of daily totals)									(Maximum 100)
● 10 puntos, * 5 puntos. ○ doble marca									

WEEKLY**ASSESSMENT – STM – SHORT-TERM MEMORY**

INDICATOR	M	T	W	T	F	S	U	Av.	POSSIBLE SOLUTION
● Excuses born of the soul	●	●	●	●	●	●	●		Accepting the mistakes
● Not knowing the day of the week or the month	●	●	●	●	●	●	●		Look it up 5 to 10 times a day.
● When I don't know something, my brain tells me it doesn't know and doesn't know where to look	●	●	●	●	●	●	●		GMS
● Not opening the correct kitchen cabinet door when...	●	●	●	●	●	●	●		Think beforehand, practice all doors 5 times a day.
● I have forgotten essential appointments or taken a pill.	●	●	●	●	●	●	●		GMS
* I didn't remember what I had eaten the day before	*	*	*	*	*	*	*		Reflect on it 5 to 10 times in the afternoon.
* I haven't left something somewhere, or it wasn't in its place.	*	*	*	*	*	*	*		Think beforehand - GMS.
* I had difficulty locating fewer usual objects	*	*	*	*	*	*	*		Review of where fewer usual objects are
* I find it difficult to remember whether I have had a conversation.	*	*	*	*	*	*	*		GMS
* Reading books, novels, or doing complicated crosswords.	*	*	*	*	*	*	*		If not used for socializing, they increase STM saturation.
* Watching TV series	*	*	*	*	*	*	*		They may also increase STM saturation.
* I had difficulty recognizing familiar names	*	*	*	*	*	*	*		Please review them
* I had difficulty recognizing familiar faces	*	*	*	*	*	*	*		Training by looking at photos
* Looking at the same place many times to find something.	*	*	*	*	*	*	*		GMS
* Error in identifying the location of a recent event.	*	*	*	*	*	*	*		GMS
TOTAL PERIOD (sum of daily averages)									(Máximo 100)
● 10 puntos, * 5 puntos. ○ doble marca.									

WEEKLY**ASSESSMENT – MEDIUM-TERM AND SPECIAL MEMORIES**

INDICATOR	M	T	W	T	F	S	U	Av.	POSSIBLE SOLUTION
● Excuses born of the soul	●	●	●	●	●	●	●		Accepting the mistakes
● Disorientation in familiar places	●	●	●	●	●	●	●		Reinforce by reviewing maps and streets.
● I'm afraid of getting lost in unfamiliar places.	●	●	●	●	●	●	●		GMS
● I don't remember streets well	●	●	●	●	●	●	●		GMS
● I can't find the word I'm looking for or need.	●	●	●	●	●	●	●		GMS
● Difficulties with people's names	●	●	●	●	●	●	●		Revisit the closest ones.
● I do not remember the lyrics of a song I once knew.	●	●	●	●	●	●	●		GMS
● I don't recognize familiar faces	●	●	●	●	●	●	●		Revise them.
● I struggle with non-basic numerical calculations.	●	●	●	●	●	●	●		Practice moderately difficult ones.
● I have forgotten why I kept an object of symbolic value.	●	●	●	●	●	●	●		GMS
TOTAL PERIOD (sum of daily averages)									(Máximo 100)
● 10 puntos. ○ doble marca.									

ASSESSMENT – PERSONAL EVENTS

	●	●	●	●	●	●	●		
	●	●	●	●	●	●	●		
	●	●	●	●	●	●	●		
	●	●	●	●	●	●	●		
	●	●	●	●	●	●	●		

WEEKLY**ASSESSMENT – GENERAL EVENTS**

INDICATOR	M	T	W	T	F	S	U	Total	POSSIBLE SOLUTION
REFLECTING ON THE PAST. Frequently or over an extended duration. (Máx. 40)									Stop as soon as you notice. Stay vigilant always
STRESS (Máx. 20)									Resolve Deep breathing.
-SOCIAL INTERACTION (Máx. 15)									What is best for living in the present
-SLEEP (Máx. 5)	*	*	*	*	*	*	*		Suitable for living in the present
-ALCOHOL (Máx. 5)	*	*	*	*	*	*	*		Resolve
-TOBACCO (Máx. 5)	*	*	*	*	*	*	*		Resolve
-GENERAL HEALTH (Máx. 4)	*	*	*	*	*	*	*		--
-Physical exercise 7000 steps daily (Máx. 3)	*	*	*	*	*	*	*		Resolve
-Hydration 2 liters per day (Máx. 3)	*	*	*	*	*	*	*		Resolve
TOTAL PERIOD (sum of daily totals):									(Máximo 100)

Personal observations:
