Cognitive impairment is the most common neurologic problem associated with brain tumors and is present in many people with brain tumors from the time of diagnosis. Treatment of primary brain tumors with surgery, radiation, chemotherapy, and adjunctive medications such as corticosteroids results in further adverse effects on cognitive function. To plan the best care for patients with brain tumors, healthcare providers must initiate systematic and accurate assessment of cognitive functioning at the first clinic visit and extend assessment throughout the course of illness. This article outlines the range of cognitive dysfunction that may be seen in patients with primary brain tumors and offers information for clinicians seeking to develop their skills and implement a systematic approach to cognitive screening. The use of cognitive screening to guide timely intervention, such as referral to a neuropsychologist and the provision of anticipatory guidance to people with brain tumors and their families, is discussed.

Cognitive impairment is common in patients with brain tumors and interferes with work, family relationships, and quality of life. Planning the best care for patients with brain tumors includes systematic assessment of cognitive functioning from the first clinic visit throughout the course of illness. Two scales have an evidence base sufficient to support their use as cognitive screening instruments in the clinic setting, specifically the Mini-Mental State Examination and the Neurobehavioral Cognitive State Examination.

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