

Physician or Health Provider Assessment of Individual Needs

To the provider:

To the provider: Your patient or a family member has taken this form from the Alzheimer's Association Web site. We ask that the patient or the family member obtain accurate information about functional

abilities from you, their health provider. The information you provide on this form will ensure the most appropriate care recommendations for your patient. To learn more about the Alzheimer's Association, visit our website at www.alz.org.

Name: _____

Date of assessment: _____

List of diagnoses

- | | |
|----------|-----------|
| 1. _____ | 6. _____ |
| 2. _____ | 7. _____ |
| 3. _____ | 8. _____ |
| 4. _____ | 9. _____ |
| 5. _____ | 10. _____ |

Person's Abilities and Needs

For each item, indicate the level of assistance needed at this time. Only select one level.

Personal Care

Bathing (including sponge bath, shower or tub):

- Independent: receives no assistance (gets in and out of the tub if tub is the usual means of bathing)
- Assistance: receives assistance in bathing only one part of the body (such as the back or a leg)
- Dependent: receives assistance in bathing more than one part of the body (or is not bathed) and is not able to transfer to tub or shower on their own

Additional Information: _____

Dressing:

- Independent: gets clothes and gets completely dressed without assistance
- Assistance: gets clothes and gets dressed without assistance except for tying shoes
- Dependent: receives assistance in getting clothes or in getting dressed or stays partly or completely undressed

Additional Information: _____

Toileting:

- Independent: goes to bathroom, cleans self and arranges clothes without assistance (may use object of support such as a cane, walker or wheelchair and may manage night bedpan or commode, emptying it in the morning)
- Assistance: receives assistance in going to the bathroom or in cleansing self or in arranging clothes after elimination or in use of night bedpan or commode
- Dependent: doesn't go to the room termed "bathroom" for the elimination process (may require the use of disposable briefs)

Additional Information: _____

Transfer:

- Independent: moves in and out of bed as well as in and out of chair without assistance (may be using object for support such as cane or walker)
- Assistance: moves in and out of bed or chair with assistance
- Dependent: doesn't get out of bed

Additional Information: _____

Continence:

- Independent: controls urination and bowel movement completely by self
- Assistance: has occasional "accidents"
- Dependent: supervision helps keep urine or bowel control; catheter is used, or is incontinent

Additional Information: _____

Feeding:

- Independent: feeds self without assistance
- Assistance: feeds self except for getting assistance in cutting meat or buttering bread
- Dependent: receives assistance in feeding or is fed partly or completely by using tubes or intravenous fluids

Additional Information: _____

Katz S, Downs TD, Cash HR, et al. Progress in the development of the index of ADL. Gerontologist. 1970;10:20-30. Copyright © The Gerontological Society of America. Reproduced by permission of the publisher.

Daily Tasks**Ability to use telephone:**

- Independent: operates telephone on own initiative – looks up and dials numbers etc.
- Assistance: dials a few well known numbers
- Assistance: answers telephone but does not dial
- Dependent: does not use telephone at all

Additional Information: _____

Shopping:

- Independent: takes care of all shopping needs independently
- Assistance: shops independently for small purchases
- Assistance: needs to be accompanied on any shopping trip
- Dependent: completely unable to shop

Additional Information: _____

Food preparation:

Independent: plans, prepares and serves adequate meals independently

Assistance: prepares adequate meals if supplied with ingredients

Assistance: heats and serves prepared meals, or prepares meals but does not maintain adequate diet

Dependent: needs to have meals prepared and served

Additional Information: _____

Housekeeping:

Independent: maintains house alone or with occasional assistance with heavy work or other domestic help

Assistance: performs light daily tasks such as dishwashing, bedmaking

Assistance: performs light daily tasks but cannot maintain acceptable level of cleanliness

Assistance: needs help with all housekeeping tasks

Dependent: does not participate in any housekeeping tasks

Additional Information: _____

Laundry:

Independent: does personal laundry completely

Assistance: launders small items- rinses socks, stockings etc.

Dependent: all laundry must be done by others

Additional Information: _____

Mode of transportation:

Independent: travels independently on public transportation or drives own car

Assistance: arranges own travel via taxi but does not otherwise use public transportation

Assistance: travels on public transportation when assisted or accompanied by another

Assistance: travel limited to taxi or automobile with assistance of another

Dependent: does not travel at all

Additional Information: _____

Responsibility for own medications:

Independent: is responsible for taking medication in correct dosages at correct time

Assistance: takes responsibility if medication is prepared in advance in separate dosages such as a pill box

Assistance: is not capable of dispensing own medication

Additional Information: _____

Ability to handle finances:

Independent: manages financial matters independently. Budgets, writes checks, pays rent, bills, goes to bank, collects and keeps track of income.

Assistance: manages day to day purchases, but needs help with banking, major purchases etc.

Dependent: incapable of handling money

Additional Information: _____

Lawton MP, Brody EM. Assessment of older people: self-maintaining and instrumental activities of daily living. Gerontologist. 1969;9:179-186. Copyright © The Gerontological Society of America. Reproduced by permission of the publisher.

Stages of Dementia

Based on your assessment, indicate the level of memory or cognitive impairment.

___ **Stage 1: No cognitive impairment**

Unimpaired individuals experience no memory problems and none are evident to a health care professional during a medical interview.

___ **Stage 2: Very mild cognitive decline**

Individuals at this stage feel as if they have memory lapses, especially in forgetting familiar words or names or the location of keys, eyeglasses or other everyday objects. But these problems are not evident during a medical examination or apparent to friends, family or co-workers.

___ **Stage 3: Mild cognitive decline**

Friends, family or co-workers begin to notice deficiencies. Problems with memory or concentration may be measurable in clinical testing or discernible during a detailed medical interview. Common difficulties include:

- Word- or name-finding problems noticeable to family or close associates
- Decreased ability to remember names when introduced to new people
- Performance issues in social or work settings noticeable to family, friends or co-workers
- Reading a passage and retaining little material
- Losing or misplacing a valuable object
- Decline in ability to plan or organize

___ **Stage 4: Moderate cognitive decline**

At this stage, a careful medical interview detects clear-cut deficiencies in the following areas:

- Decreased knowledge of recent occasions or current events
- Impaired ability to perform challenging mental arithmetic—for example, to count backward from 100 by 7s
- Decreased capacity to perform complex tasks, such as marketing, planning dinner for guests or paying bills and managing finances
- Reduced memory of personal history
- The affected individual may seem subdued and withdrawn, especially in socially or mentally challenging situations

___ **Stage 5: Moderately severe cognitive decline**

Major gaps in memory and deficits in cognitive function emerge. Some assistance with day-to-day activities becomes essential. At this stage, individuals may:

- Be unable during a medical interview to recall such important details as their current address, their telephone number or the name of the college or high school from which they graduated
- Become confused about where they are or about the date, day of the week, or season
- Have trouble with less challenging mental arithmetic; for example, counting backward from 40 by 4s or from 20 by 2s
- Need help choosing proper clothing for the season or the occasion
- Usually retain substantial knowledge about themselves and know their own name and the names of their spouse or children
- Usually require no assistance with eating or using the toilet

Stages of Dementia (cont.)

___Stage 6: Severe cognitive decline

Memory difficulties continue to worsen, significant personality changes may emerge and affected individuals need extensive help with customary daily activities. At this stage, individuals may:

- Lose most awareness of recent experiences and events as well as of their surroundings
- Recollect their personal history imperfectly, although they generally recall their own name
- Occasionally forget the name of their spouse or primary caregiver but generally can distinguish familiar from unfamiliar faces
- Need help getting dressed properly; without supervision, may make such errors as putting pajamas over daytime clothes or shoes on wrong feet
- Experience disruption of their normal sleep/waking cycle
- Need help with handling details of toileting (flushing toilet, wiping and disposing of tissue properly)
- Have increasing episodes of urinary or fecal incontinence
- Experience significant personality changes and behavioral symptoms, including suspiciousness and delusions (for example, believing that their caregiver is an impostor); hallucinations (seeing or hearing things that are not really there); or compulsive, repetitive behaviors such as hand-wringing or tissue shredding
- Tend to wander and become lost

___Stage 7: Very severe cognitive decline

This is the final stage of the disease when individuals lose the ability to respond to their environment, the ability to speak and, ultimately, the ability to control movement.

- Frequently individuals lose their capacity for recognizable speech, although words or phrases may occasionally be uttered
- Individuals need help with eating and toileting and there is general incontinence of urine
- Individuals lose the ability to walk without assistance, then the ability to sit without support, the ability to smile, and the ability to hold their head up. Reflexes become abnormal and muscles grow rigid. Swallowing is impaired.

Reisberg, B., Ferris, S.H., de Leon, M.J., Crook., T. The global deterioration scale for assessment of primary degenerative dementia. American Journal of Psychiatry, 1982, 139: 1136-1139. Copyright © 1983 by Barry Reisberg, M.D.