

INSTRUMENTAL ACTIVITIES OF DAILY LIFE & PHYSICAL SELF-MAINTENANCE SCALE

This questionnaire must be filled out by a family member or other caregiver who has frequent contact with the participant. The following questions are designed to provide us with information concerning your family member's abilities in the various areas of daily living skills. Check only one statement that best describes the patient's behavior. Please answer the question honestly and completely. Thank you for your cooperation.

1. Telephone Use

- ☐ A. Operates telephone on own initiative – looks up and dials numbers, etc.
- ☐ B. Dials a few well known numbers
- ☐ C. Answers the telephone, but does not dial
- ☐ D. Does not use telephone at all

2. Shopping

- ☐ A. Takes care of all shopping needs independently
- ☐ B. Shops independently for small purchases
- ☐ C. Needs to be accompanied on any shopping trip
- ☐ D. Completely unable to shop

3. Food Preparation

- ☐ A. Plans, prepares, and serves adequate meals independently
- ☐ B. Prepares adequate meals if supplied with ingredients
- ☐ C. Heats and serves prepared meals, or prepares meals but does not maintain an adequate diet
- ☐ D. Needs to have meals prepared and served

4. Housekeeping

- ☐ A. Maintains house alone or with occasional assistance (e.g. "heavy-work domestic help")
- ☐ B. Performs light daily tasks such as dish-washing, bed-making, etc.
- ☐ C. Performs light daily tasks, but cannot maintain acceptable level of cleanliness
- ☐ D. Needs help with all home maintenance tasks
- ☐ E. Does not participate in any housekeeping tasks

5. Laundry

- ☐ A. Does personal laundry completely
- ☐ B. Launders small items – rinses socks, stockings, etc.
- ☐ C. All laundry must be done by others

6. Mode of Transportation

- ☐ A. Travels independently on public transportation or drives own car
- ☐ B. Arranges own travel via taxi, but does not otherwise use public transportation
- ☐ C. Travels on public transportation when accompanied by another
- ☐ D. Travel limited to taxi or automobile with assistance of another
- ☐ E. Does not travel at all

7. Responsibility for own Medications

- ☐ A. Is responsible for taking medication in correct dosages at correct time
- ☐ B. Takes responsibility if medication is prepared in advance in separate dosages
- ☐ C. Is not capable of dispensing own medication

8. Ability to Handle Finances

- ☐ A. Manages financial matters independently (budgets, writes checks, pays rent/bills, goes to bank, collects and keeps track of income)
- ☐ B. Manages day-to-day purchases, but needs help with banking, major purchases, etc.
- ☐ C. Incapable of handling money

9. Toileting

- ☐ A. Cares for self at toilet completely, no incontinence
- ☐ B. Needs to be reminded, or needs help in cleaning self, or has rare (weekly at most) accidents
- ☐ C. Soiling or wetting while asleep more than once a week
- ☐ D. soiling or wetting while awake more than once a week
- ☐ E. No control of bowels or bladder

10. Feeding

- ☐ A. Eats without assistance
- ☐ B. Eats with minor assistance at meal-times and/or with special preparation for food, or with help cleaning up after meals
- ☐ C. Feeds self with moderate assistance and is untidy
- ☐ D. Requires extensive assistance for all meals
- ☐ E. Does not feed self at all and resists efforts of other to feed him/her

11. Dressing

- ☐ A. Dresses , undresses, and selects clothes from own wardrobe
- ☐ B. Dresses and undresses self with minor assistance
- ☐ C. Needs moderate assistance in dressing or selection of clothes
- ☐ D. Needs major assistance in dressing, but cooperates with efforts of others to help
- ☐ E. Completely unable to dress self and resists efforts of other to help

12. Grooming

- ☐ A. Always neatly dressed, well-groomed, without assistance
- ☐ B. Grooms self adequately with occasional minor assistance (e.g. shaving)
- ☐ C. Needs moderate and regular assistance or supervision in grooming
- ☐ D. Needs total grooming care, but can remain well-groomed after help from other
- ☐ E. Actively negates all efforts of other to maintain grooming

13. Physical Ambulation

- ☐ A. Goes about grounds or city
- ☐ B. Ambulates within residence or about one block distance
- ☐ C. Ambulates with assistance of another person, railing, cane, walker, wheelchair
- ☐ D. Sits unsupported in chair or wheelchair, but cannot propel self without help
- ☐ E. Bedridden more than half the time

14. Bathing

- ☐ A. Bathes self (tub, shower, sponge bath) without help
- ☐ B. Bathes self with help getting in and out of tub
- ☐ C. Washes face and hands only, but cannot bathe rest of body
- ☐ D. Does not wash self, but is cooperative with those who bathe him/her
- ☐ E. Does not try to wash self and resists effort to keep him/her clean