Activities of Daily Living (ADL) Assessment Tool

Personal Information			
Name:			
Date of Birth:			
Gender:			
Date of Assessment:			
Assessment Conducted	Ву:		
Instructions			
For each activity, please	select the corresponding le	evel of independence:	
0 - Dependent: The indi	vidual is unable to perform	the activity without total a	ssistance.
1 - Partially Dependent	: The individual requires as	ssistance/supervision to co	omplete the activity.
2 - Independent with Di	2 - Independent with Difficulty: The individual can complete the activity but with some difficulty.		
3 - Independent: The ind	dividual can perform the ac	ctivity without any assistar	nce.
ACTIVITIES			
Personal Hygiene:			
1. Bathing:			
	\circ		
0.	1.	2.	3.
Dependent	Partially Dependent	Independent with Difficulty	Independent
2. Grooming (brushing h	nair, shaving, etc.):		
	\bigcirc	\bigcirc	
0.	1.	2.	3.
Dependent	Partially Dependent	Independent with Difficulty	Independent

0. Dependent	1. Partially Dependent	2. Independent with	3. Independent
		Difficulty	
Mobility:			
1. Transferring (moving	from bed to chair, wheelch	nair, etc.):	
			\circ
0.	1.	2.	3.
Dependent	Partially Dependent	Independent with Difficulty	Independent
2. Walking:			
\bigcirc	\bigcirc	\circ	\circ
0.	1.	2.	3.
Dependent	Partially Dependent	Independent with Difficulty	Independent
3. Using Assistive Device	ces (cane, walker, wheelcha	air):	
\bigcirc		\circ	
0.	1.	2.	3.
0. Dependent	1. Partially Dependent	2. Independent with Difficulty	3. Independent
		Independent with	
Dependent	Partially Dependent	Independent with	
Dependent Eating:	Partially Dependent	Independent with	
Dependent Eating:	Partially Dependent	Independent with	

3. Dressing (putting on/taking off clothes, fastening buttons/zippers):

	\circ		\circ
0.	1.	2.	3.
Dependent	Partially Dependent	Independent with Difficulty	Independent
Toileting:			
1. Toileting (ability to use	e the toilet independently)):	
	\bigcirc	\bigcirc	\bigcirc
0.	1.	2.	3.
Dependent	Partially Dependent	Independent with Difficulty	Independent
2. Maintaining Continend	ce (control of bladder and	bowel movements):	
			\bigcirc
0. Dependent	1. Partially Dependent	2. Independent with Difficulty	3. Independent
Instrumental Activities	s of Daily Living (IAD	DL):	
1. Household Chores (cl	eaning, laundry, etc.):		
			\circ
0.	1.	2.	3.
Dependent	Partially Dependent	Independent with Difficulty	Independent
2. Meal Planning and Sh	opping:		
			\circ
0.	1.	2.	3.
Dependent	Partially Dependent	Independent with Difficulty	Independent

2. Meal Preparation (cutting food, using utensils):

\bigcirc	\bigcirc	\bigcirc	\bigcirc
0	1	2	2
0. Dependent	1. Partially Dependent	2. Independent with Difficulty	3. Independent
Cognitive Function:			
1. Memory (short-term a	nd long-term):		
	\bigcirc		\circ
0.	1.	2.	3.
Dependent	Partially Dependent	Independent with Difficulty	Independent
2. Problem Solving:			
	\circ		\circ
0. Dependent	1. Partially Dependent	2. Independent with Difficulty	3. Independent
Safety Awareness:			
1. Home Safety (awarene	ess of potential hazards a	at home):	
	\bigcirc		\circ
0.	1.	2.	3.
Dependent	Partially Dependent	Independent with Difficulty	Independent
2. Community Safety (cro	ossing roads, using publi	c transportation):	
	\bigcirc		\bigcirc
0.	1.	2.	3.
Dependent	Partially Dependent	Independent with Difficulty	Independent

3. Managing Finances:

Additional Comments