1 Very fit



People who are robust, active, energetic and motivated. These people commonly exercise regularly. They are among the fittest for their age.

2 Well



People who have no active disease symptoms but are less fit than category 1. Often, they exercise or are very active occasionally, for example, seasonally.

3 Managing well



People whose medical problems are well controlled, but are not regularly active beyond routine walking.

4 Vulnerable



While not dependent on others for daily help, often symptoms limit activities. A common complaint is being 'slowed up', and/or being tired during the day.

5 Mildly frail



These people often have more evident slowing, and need help in high order IADLs (finances, transportation, heavy housework, medications). Typically, mild frailty progressively impairs shopping and walking outside alone, meal preparation and housework.

6 Moderately frail



People need help with all outside activities and with keeping house. Inside, they often have problems with stairs and need help with bathing and might need minimal assistance (cuing, standby) with dressing.

7 Severely frail



Completely dependent for personal care from whatever cause (physical or cognitive). Even so, they seem stable and not at high risk of dying (within ~6 months).

8 Very severely frail



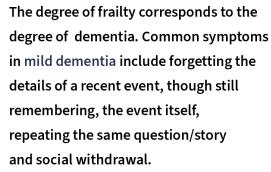
Completely dependent, approaching the end of life. Typically, they could not recover even from a minor illness.

9 Terminally ill



Approaching the end of life. This category applies to people with a life expectancy, <6 months, who are not otherwise evidently frail.

Scoring frailty in people with dementia



In moderate dementia, recent memory is very impaired, even though they seemingly can remember their past life events well. They can do personal care with prompting.

- *1. Canadian Study on Health & Aging, revised 2008.
- 2. Rockwood, K., Song, X., MacKnight, C., Bergman, H., Hogan, D. B., McDowell, I., & Mitnitski, A. (2005). A global clinical measure of fitness and frailty in elderly people. *CMAJ: Canadian Medical Association Journal*, 173(5), 489–495. https://doi.org/10.1503/cmaj.050051.
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