



PICTORIAL  
FIT-FRAIL  
SCALE

HCP VERSION

For each category, choose ONE picture that is closest to your patient's USUAL state. Circle the score below that picture and transfer it to the right.

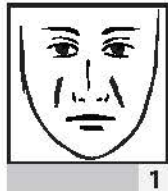
NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

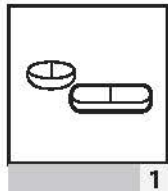
TOTAL SCORE



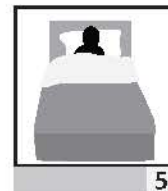
1 MOOD



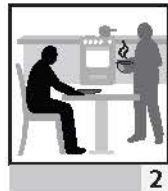
2 NUMBER OF MEDICATIONS



3 MOBILITY



4 FUNCTION



5 BALANCE

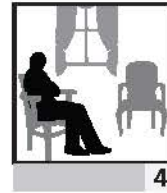


SCORE

BEST

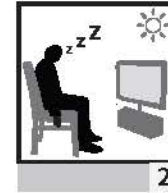
WORST

6 SOCIAL CONNECTIONS

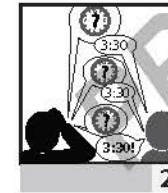


SCORE

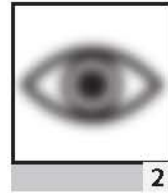
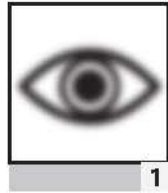
7 DAYTIME TIREDNESS



8 MEMORY AND THINKING

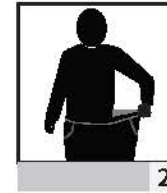
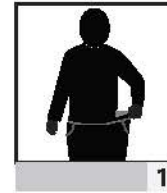


9 VISION (WITH GLASSES IF NEEDED)



SCORE

12 UNINTENTIONAL WEIGHT-LOSS



SCORE

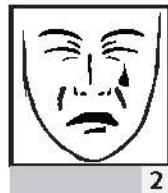
10 HEARING (WITH HEARING AID IF NEEDED)



13 AGGRESSION



11 PAIN



14 BLADDER CONTROL

