



图示健康
衰弱量表

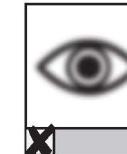
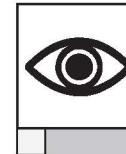
姓名: _____

日期: _____

说明:本量表中的图片按照从最好到最差排序,目的是评估您在不同方面的**通常状态**。

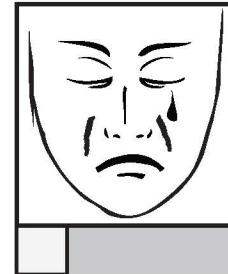
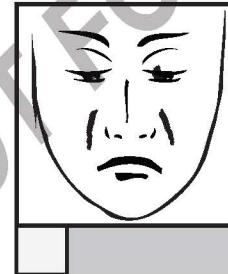
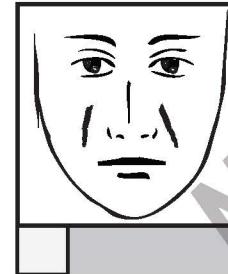
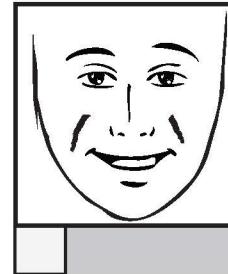
对于各个方面,选择一张最符合您**通常状态**的图片,并在图片下方标注。答案没有对错之分。

示例:如图所示,如果您通常视力最符合第二张图片,就在图片下方标记。

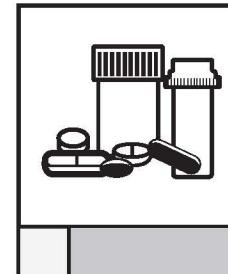
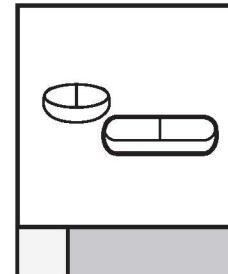
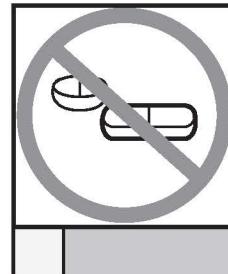


最好 ← ━━━━━━ → 最差

1 心情



2 用药数量

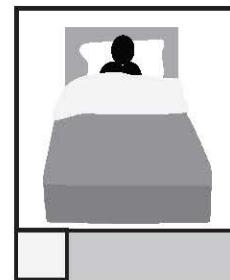
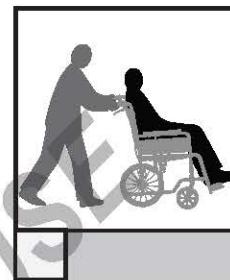
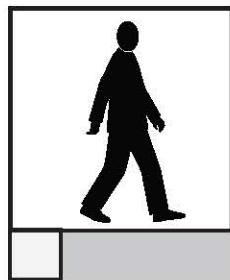
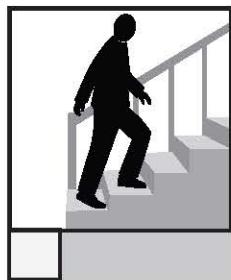




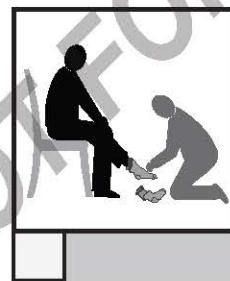
对于各个方面,请勾选一个最符合您通常状态的图片。



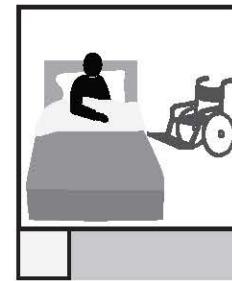
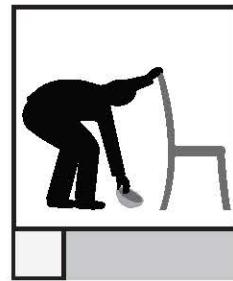
3 活动能力



4 日常功能



5 平衡能力

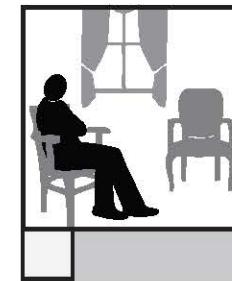




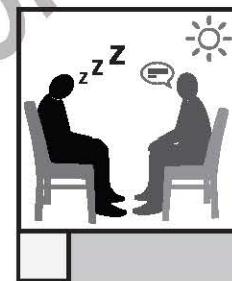
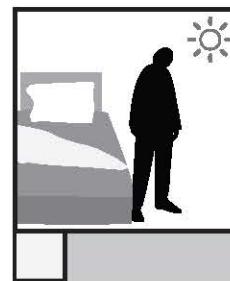
对于各个方面,请勾选一个最符合您通常状态的图片。



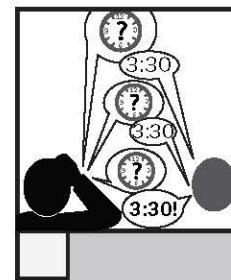
6 社交联系



7 日间嗜睡



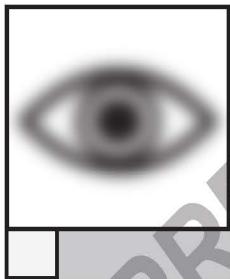
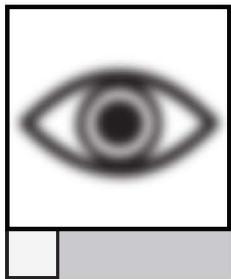
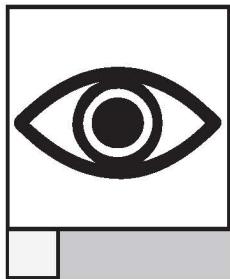
8 记忆与思维



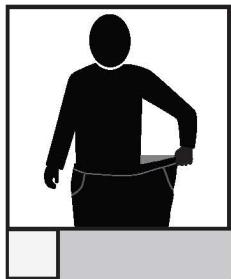
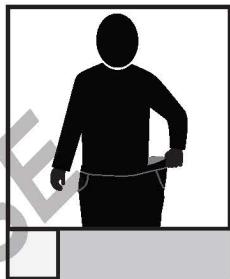
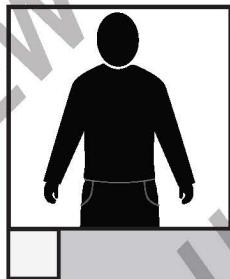
对于各个方面,请勾选一个最符合您通常状态的图片。



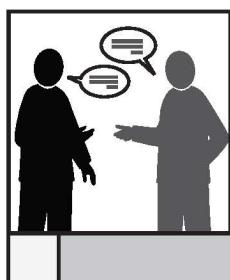
9 视力 (如有需要, 可佩戴眼镜)



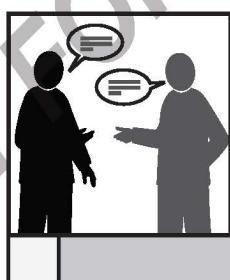
12 非计划性体重下降



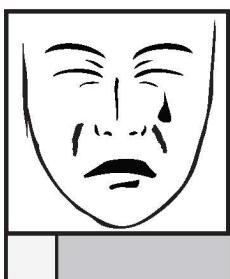
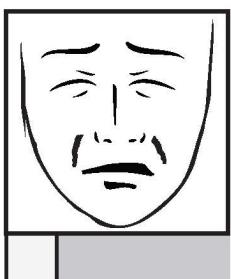
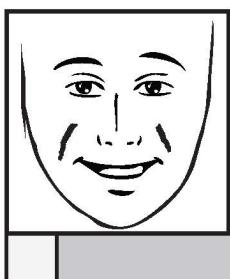
10 听力 (如有需要, 可使用助听器)



13 攻击



11 疼痛



14 膀胱控制

