Does the patient already have a known diagnosis of dementia? (Please circle the appropriate number) Clinical Frailty Scale* 7 Severely Frail – Completely dependent for personal care, from whatever cause (physical or Very Fit – People who are robust, active, energetic cognitive). Even so, they seem stable and not at and motivated. These people commonly exercise high risk of dying (within ~ 6 months). regularly. They are among the fittest for their age. 2 Well – People who have no active disease 8 Very Severely Frail - Completely dependent, symptoms but are less fit than category 1. Often, they approaching the end of life. Typically, they could exercise or are very active occasionally, e.g. seasonally. not recover even from a minor illness. 3 Managing Well - People whose medical problems are well controlled, but are not regularly active 9 Terminally III - Approaching the end of life. This beyond routine walking. category applies to people with a life expectancy <6 months, who are not otherwise evidently frail. 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 Scoring frailty in people with dementia during the day. The degree of frailty corresponds to the degree of dementia. Common symptoms in mild dementia include forgetting the 5 Mildly Frail – These people often have more details of a recent event, though still remembering the event itself, evident slowing, and need help in high order IADLs repeating the same question/story and social withdrawal. (finances, transportation, heavy housework, medica-In moderate dementia, recent memory is very impaired, even tions). Typically, mild frailty progressively impairs though they seemingly can remember their past life events well. shopping and walking outside alone, meal preparation They can do personal care with prompting. and housework. In severe dementia, they cannot do personal care without help. 6 Moderately Frail – People need help with all outside activities and with keeping house. Inside, they * 1. Canadian Study on Health & Aging, Revised 2008. often have problems with stairs and need help with 2. K. Rockwood et al. A global clinical measure of fitness and frailty in elderly people. CMAJ 2005;173:489-495. bathing and might need minimal assistance (cuing, standby) with dressing. **Abbreviated Mental Test Score** Ask the following questions to the patient. Each question that is correctly answered scores one point: 1. What is your age?

6. Can the patient recognise two persons (e.g. the doctor, nurse etc.)? 2. What is the time to the nearest hour? 7. What is your date of birth? (day and month 3. Give the patient an address, ask him/her to repeat it sufficient) at the end of the test e.g. 42, West Street 8. In what year did World War 1 begin? 4. What is the year? 9. Name the present monarch/prime minister 5. What is the name of the hospital/ number of residence where the patient is situated? 10. Count backwards from 20 to 1 Π

Patient chose not to answer all questions \Box

Note: A score of **6 or less** suggests delirium or dementia, although further tests are necessary to confirm the diagnosis

•	Does the	patient	have	severe*	cardiore	espiratory	disease?
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Yes / No

Total score = / 10

* severe = less than ordinary physical activity or rest causes tiredness, palpitations or shortness of breath

Does the patient have any other non-breast locally advanced / metastatic malignancy?

□ No (**complete** all the assessments)

□ Yes (**omit** AMTS assessment)

