CGA and Health Note

Chief lifelong occupation: _____ Education: (yrs) _____

Vitals				
BP:	❒ Lying	❒ Sitting	❒ Standing	
	❒ Arm(L)	❒ Arm(R)	❒ Thigh(L)	❒ Thigh(R)
HR:	**Rhythm:** ❒ Regular ❒ Irregular	**Description:** ❒ Normal ❒ Thready	❒ Strong ❒ Rapid	❒ Bounding ❒ Thin
RR:	**Description:** ❒ Normal/No Distress ❒ Audible Crackles		❒ Audible Wheeze ❒ Stridor	
WT:	**SpO_2:**	**Blood Glucose:**		

Patient : _____

DOB(d/m/y): _____

HC# : _____ **Exp:** _____

Primary Provider:

Active Provider:

Cr Cl/eGFR: _____

Date(d/m/y): _____

Infection Control

MRSA: ❒ Pos ❒ Neg

VRE: ❒ Pos ❒ Neg

Flu shot given(d/m/y):

Pneumococcal Vaccine given(d/m/y) :

TB test Done((d/m/y):

Tetanus given (d/m/y):

Other :

Allergies

Please provide Allergen & Reaction(s)

Problems/Past History/Diagnosis	❒ Medication Review Completed	Associated Medication
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		

Plan Notes:

Referred To:

Nurse Practitioner Name (please print): _____

Nurse Practitioner Signature: _____ Signed on (d/m/y): _____

DEFINITIONS: **WNL:** Within Normal Limits **IND:** Independent **ASST:** Assisted **DEP:** Dependent
Partnered: a conjugal relationship of < 12 continuous months **Living with:** People residing together; not as a couple

Cognitive Status
❒ WNL
❒ Dementia
❒ Delirium

Emotional
❒ WNL ❒ ⇩Mood
❒ Depression ❒ Anxiety
❒ Other
❒ Hallucinations/Delusions

Behaviours
❒ Verbal Non-aggressive
❒ Verbal Aggressive
❒ Physical Non-aggressive
❒ Physical Aggressive

MMSE :_____ **Date** (d/m/y):_____

Communication:

Speech	Hearing	Vision
❒ WNL	❒ WNL	❒ WNL
❒ Impaired	❒ Impaired	❒ Impaired

Foot-care needed ❒ Yes ❒ No
Dental care needed ❒ Yes ❒ No
Skin Integrity Issues ❒ Yes ❒ No

Strength
❒ WNL ❒ Weak
Upper: Proximal Distal R L
Lower: Proximal Distal R L

Personal Directives ❒ Yes ❒ No
Substitute Decision Maker:
Tel #: _____

Mobility	Transfers	❒ IND ❒ ASST ❒ DEP
	Walking	❒ IND Slow ❒ ASST ❒ DEP
	Aid	_____
Balance	Balance	❒ WNL ❒ Impaired
	Falls	❒ No ❒ Yes Frequency:
Elimination	Bowel	❒ Constip ❒ Cont ❒ Incont
	Bowel Desc.	❒Soft formed ❒ Loose ❒ Liquid ❒ Constipated ❒ Abnormal Color
	Bladder	❒ Catheter ❒ Cont ❒ Incont
Nutrition	Weight	❒ STABLE ❒ LOSS ❒ GAIN
	Appetite	❒ WNL ❒ FAIR ❒ POOR
ADLs	Feeding	❒ IND ❒ ASST ❒ DEP
	Bathing	❒ IND ❒ ASST ❒ DEP
	Dressing	❒ IND ❒ ASST ❒ DEP
	Toileting	❒ IND ❒ ASST ❒ DEP

Code Status:
❒ Do Not Attempt to Resuscitate
❒ Do Not Hospitalize
❒ Hospitalize
❒ Attempt to Resuscitate

Relationship Status
❒ Married
❒ Divorced
❒ Widowed
❒ Single
❒ Common Law
❒ Partnered
❒ Living with

Family Stress
❒ None
❒ Low
❒ Moderate
❒ High

Current Frailty Score*

Scale ❒ 5. Mildly Frail ❒ 6. Moderately Frail ❒ 7. Severely Frail ❒ 8. Very Severely ill ❒ 9. Terminally Ill

Clinical Frailty Scale*

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 from even 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
The degree of frailty corresponds to the degree of dementia. Common **symptoms in mild dementia** include forgetting the details of a recent event, though still remembering the event itself, repeating the same question/story and social withdrawal.

- 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.
- In **severe dementia**, they cannot do personal care without help.

* 1. Canadian Study on Health & Aging, Revised 2008
2. K. Rockwood et al. A global clinical measure of fitness and frailty in elderly people. CMAJ 2005; 173; 489-495

Nurse Practitioner Name (please print): _____

Nurse Practitioner Signature: _____ Signed on (d/m/y): _____