

First Name    Last Name		YYYY-MM-DD	
Patient Name:		Patient Birthdate:	
HCP Evaluator:		Evaluation Date:	
Domain	Questions	Answers	Score
<b>Disability A</b>	Have you any difficulties at walking 400 meters?	0 = No or some difficulties 1 = A lot of difficulties or unable	
<b>B</b>	Have you any difficulties at climbing up a flight of stairs?	0 = No or some difficulties 1 = A lot of difficulties or unable	
<b>Frailty C</b>	During the last year, have you involuntarily lost more than 4.5 kg?	0 = No 1 = Yes	
<b>D</b>	How often in the last week did you feel that everything you did was an effort or that you could not get going?	0 = Rarely or sometimes (2 times or less/week) 1 = Often or almost always (3 or more times weekly)	
<b>E</b>	Which is your level of physical activity?	0 = Regular physical activity (at least 2 - 4 hours weekly) 1 = None or mainly sedentary	
<b>Scoring</b> If A+B ≥1, the individual is considered as "disabled". If A+B=0 and C+D+E ≥1, the individual is considered as "frail". If A+B+C+D+E=0, the individual is considered as "robust".		<b>Disability Score</b>	<b>Frailty Score</b>
© 2014 Cesari et al., <i>A Self-Reported Screening Tool for Detecting Community-Dwelling Older Persons with Frailty Syndrome in the Absence of Mobility Disability: The FiND Questionnaire.</i>			