

# Health Assessment Questionnaire for Elderly Patients

A **health assessment questionnaire** for elderly patients is a vital tool used to evaluate physical, mental, and emotional well-being, ensuring comprehensive care. It helps healthcare providers identify potential health risks and tailor treatments effectively. Regular assessments contribute to improved quality of life and early detection of health issues in seniors.

## Patient Information

Full Name:

Age:

Gender:

Female

## Physical Health

1. How would you rate your current physical health?

Excellent

2. Do you have any chronic medical conditions? (e.g., diabetes, hypertension, arthritis)

3. Do you experience any of the following? (Check all that apply)

- ☐ Chronic pain
- ☐ Mobility issues
- ☐ Fatigue
- ☐ Unintentional weight loss
- ☐ None of the above

## Mental and Emotional Health

1. In the past month, have you felt sad or depressed?

- ☐ Often
- ☐ Sometimes
- ☐ Rarely
- ☐ Never

2. Have you experienced memory problems or confusion?

- ☐ Yes
- ☐ No

3. Do you have a support system (family, friends, community) you can rely on?

- ☐ Yes
- ☐ No

## Daily Living Activities

1. Do you need help with any of the following? (Check all that apply)

- ☐ Bathing
- ☐ Dressing

- ☐ Eating
- ☐ Toileting
- ☐ Moving around
- ☐ None of the above

2. Are you able to manage your medications independently?

- ☐ Yes
- ☐ No

## Additional Comments

Please add any other relevant information or concerns.

Submit Assessment