

Dementia Warning Sign Screening

Instructions: Check yes or no for each symptom. Below in the notes section, write any additional details about the symptoms such as when you noticed the changes, if there has been more decline in certain areas, and any other symptoms worth noting.

Yes	No	
		Does he/she repeat questions more frequently
		Does he/she exhibit poor grooming and personal hygiene?
		Does he/she forget to take medications or take them incorrectly?
		Has there been a change in eating habits or loss of appetite?
		Is outdated food in the refrigerator or little nutritious food?
		Has driving been impaired? Frequent accidents?
		Is he/she increasingly forgetful?
		Is he/she moody or depressed?
		Has there been a loss of interest in socializing?
		Is he/she less interested in former activities?
		Is he/she unsteady on her feet or does she fall frequently?
		Does he/she have difficulty concentrating?
		Does he/she exhibit poor judgment?
		Is he/she incontinent?
		Is there trouble handling finances? Are there unpaid bills?
		Does he/she spend long periods of time doing nothing?
		Have others noticed personality changes?
		Is there unopened mail lying around?
		Is there poor housekeeping or unsafe conditions?
		Does he/she have trouble making decisions?
		Does he/she get lost?
		Does he/she have trouble finding the right words?
		Does he/she wear the same clothes over and over again?

Notes:

Date Screening Form Completed: _____

Call us to discuss your loved one's needs and how we
can serve him or her through their dementia journey.

763-710-8484

