

Madlyn and Leonard  
**Abramson Center  
 for Jewish Life**



**INSTRUMENTAL ACTIVITIES OF DAILY LIVING SCALE (IADL)**

M.P. Lawton & E.M. Brody

A. Ability to use telephone

- |                                                                           |   |
|---------------------------------------------------------------------------|---|
| 1. Operates telephone on own initiative; looks up and dials numbers, etc. | 1 |
| 2. Dials a few well-known numbers                                         | 1 |
| 3. Answers telephone but does not dial                                    | 1 |
| 4. Does not use telephone at all.                                         | 0 |

B. Shopping

- |                                                   |   |
|---------------------------------------------------|---|
| 1. Takes care of all shopping needs independently | 1 |
| 2. Shops independently for small purchases        | 0 |
| 3. Needs to be accompanied on any shopping trip.  | 0 |
| 4. Completely unable to shop.                     | 0 |

C. Food Preparation

- |                                                                                            |   |
|--------------------------------------------------------------------------------------------|---|
| 1. Plans, prepares and serves adequate meals independently                                 | 1 |
| 2. Prepares adequate meals if supplied with ingredients                                    | 0 |
| 3. Heats, serves and prepares meals or prepares meals but does not maintain adequate diet. | 0 |
| 4. Needs to have meals prepared and served.                                                | 0 |

D. Housekeeping

- |                                                                                          |   |
|------------------------------------------------------------------------------------------|---|
| 1. Maintains house alone or with occasional assistance (e.g. "heavy work domestic help") | 1 |
| 2. Performs light daily tasks such as dish-washing, bed making                           | 1 |
| 3. Performs light daily tasks but cannot maintain acceptable level of cleanliness.       | 1 |
| 4. Needs help with all home maintenance tasks.                                           | 1 |
| 5. Does not participate in any housekeeping tasks.                                       | 0 |

E. Laundry

- |                                                 |   |
|-------------------------------------------------|---|
| 1. Does personal laundry completely             | 1 |
| 2. Launders small items; rinses stockings, etc. | 1 |
| 3. All laundry must be done by others.          | 0 |

F. Mode of Transportation

- |                                                                                    |   |
|------------------------------------------------------------------------------------|---|
| 1. Travels independently on public transportation or drives own car.               | 1 |
| 2. Arranges own travel via taxi, but does not otherwise use public transportation. | 1 |
| 3. Travels on public transportation when accompanied by another.                   | 1 |
| 4. Travel limited to taxi or automobile with assistance of another.                | 0 |
| 5. Does not travel at all.                                                         | 0 |

G. Responsibility for own medications

- |                                                                                  |   |
|----------------------------------------------------------------------------------|---|
| 1. Is responsible for taking medication in correct dosages at correct time.      | 1 |
| 2. Takes responsibility if medication is prepared in advance in separate dosage. | 0 |
| 3. Is not capable of dispensing own medication.                                  | 0 |

H. Ability to Handle Finances

- |                                                                                                                                         |   |
|-----------------------------------------------------------------------------------------------------------------------------------------|---|
| 1. Manages financial matters independently (budgets, writes checks, pays rent, bills goes to bank), collects and keeps track of income. | 1 |
| 2. Manages day-to-day purchases, but needs help with banking, major purchases, etc.                                                     | 1 |
| 3. Incapable if handling money.                                                                                                         | 0 |

**Source:** Lawton, M.P., and Brody, E.M. "Assessment of older people: Self-maintaining and instrumental activities of daily living." *Gerontologist* 9:179-186, (1969).

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