



fraserhealth

Better health.
Best in health care.

**SURREY MEMORIAL HOSPITAL
Occupational Therapy – Functional Limitation Checklist**

Please check off if you have a problem or concern participating in any of the following areas. Identify energy saving tips you can use to overcome those areas of concern.

Activities of Daily Living

- | | |
|--|------------------------------------|
| <input type="checkbox"/> Washing/bathing | <input type="checkbox"/> Dressing |
| <input type="checkbox"/> Grooming | <input type="checkbox"/> Toileting |

Comments _____

Energy Saving Tip _____

Instrumental Activities of Daily Living

- | | |
|--|---|
| <input type="checkbox"/> Cleaning | <input type="checkbox"/> Laundry |
| <input type="checkbox"/> Driving | <input type="checkbox"/> Banking |
| <input type="checkbox"/> Grocery shopping | <input type="checkbox"/> Cooking/meal preparation |
| <input type="checkbox"/> Mowing the lawn/Yard Work | <input type="checkbox"/> Outdoor home maintenance |

Comments _____

Energy Saving Tip _____

Productivity

- | | |
|--|---|
| <input type="checkbox"/> Ability to work | <input type="checkbox"/> Volunteer Work |
|--|---|

Comments _____

Energy Saving Tip _____

Leisure

- Gardening
- Taking leisure walks
- Other
- Bowling
- Leisure sports activities

Comments _____

Energy Saving Tip _____

Physical Limitations:

- Lifting
- Reaching
- Squatting
- Standing
- Other
- Carrying
- Bending
- Twisting
- Walking

Comments _____

Energy Saving Tip _____