

## MNEMONIC AIDS TO ADL ASSESSMENTS

Dear Editor,

As the problems of our aging society gathering attention, the skills of doctors serving the community is necessary of geriatric orientation. The Postgraduate Diploma of Community Geriatric course conducted by the Hong Kong Geriatric Society and the Family Medicine Unit, University of Hong Kong is a timely and successful response to such challenge.<sup>1</sup>

It is of major clinical interest for medical practitioner and health care workers to perform geriatric assessments. As a new pursuer in this subject area, our study group in the Postgraduate Diploma of Community Geriatric Course found it confusing with various geriatric assessment tools. Knowing mnemonic aids were commonly used to help recall of various clinical factors, e.g. DRIP in acute urinary incontinence.<sup>2</sup> I have composed 2 sets of short Chinese sentences to aid the recall of two of the more commonly used geriatric assessment tools, namely, the Barthel Activity of Daily Living (BADL) and the Instrumental Activities of Daily Living (IADL)<sup>3</sup>.

The two sets are as follows:

### 1. *The Barthel Activities of Daily Living (BADL)*

梳洗大小去廁所 衣食落床行樓梯

which corresponds to the daily activities, namely Grooming, Bathing, Continence (Stool, Urine), Toileting; Dressing, Feeding, Transfer (from bed), Ambulation, Stairs.

### 2. *The Instrumental Activities of Daily Living (IADL)*

買家電煮飯 藥財行洗衫

which summarises the essential items in IADL of Shopping, Housekeeping, Telephone and Cooking;

Medication, Finance (Money), Transportation and Laundry.

The content is self-explanatory. Special efforts were made to ensure each individual word would stand for a particular screening area and linked in a logical sequence for recall.

I find the mnemonic a quick reminder in my daily geriatric encounters. It also helps in the consultation with the carer to explain and list the most basic daily functional needs, which are very often taken for granted by the non-geriatric population. The aid should be of help to the beginner in geriatric learning.

### Reference:

1. Lum, C. Geriatric Training for non-specialist. Editorials. *Jour HK Geriatr Soc.* 2002;11:1
2. Cordts G. Urinary Incontinence. In Forciea M, Lavizzo-Mourey R and Schwab E (eds): *Geriatric Secrets, 2<sup>nd</sup> ed.* Philadelphia: Hanley & Belfus Inc., 2000, 277.
3. Kane R, Ouslander J, Abrass I. Evaluating the elderly patient. *Essential of Clinical Geriatrics, 3<sup>rd</sup> ed.* New York: McGraw Hill International. 1994,65. ■

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