

## Waisman Activities of Daily Living Scale (W-ADL)

Instructions: "We would like to know about your son or daughter's current level of independence in performing activities of daily living. For each activity please tell me the number which best describes your son/daughter's ability to do the task. For example, Independent would mean your son/daughter is able to do the task without any help or assistance"

<b>PLEASE RATE (name of child)'S LEVEL OF INDEPENDENCE IN...</b>	<b>Ability to perform task 2 = Independent or does on own 1 = does with help 0 = does not do at all</b>
1. Making his/her own bed	_____
2. Doing household tasks, including picking up around the house, putting things away, light housecleaning, etc.	_____
3. Doing errands, including shopping in stores	_____
4. Doing home repairs, including simple repairs around the house, non-technical in nature; for example, changing light bulbs or repairing a loose screw	_____
5. Doing laundry, washing and drying	_____
6. Washing/bathing	_____
7. Grooming, brushing teeth, combing and/or brushing hair	_____
8. Dressing and undressing	_____
9. Toileting	_____
10. Preparing simple foods requiring no mixing or cooking, including sandwiches, cold cereal, etc.	_____
11. Mixing and cooking simple foods, fry eggs, make pancakes, heat food in microwave, etc.	_____
12. Preparing complete meal	_____
13. Setting and clearing table	_____
14. Drinking from a cup	_____
15. Eating from a plate	_____
16. Washing dishes (including using a dishwasher)	_____
17. Banking and managing daily finances, including keeping track of cash, checking account, paying bills, etc. (Note: if he/she can do a portion but not all circle '1' with help.)	_____