


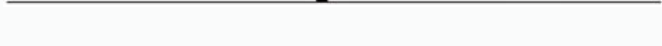
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Initial questions	Follow-up questions	Symptom characterization	KPS %	Comments
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KARNOFSKY PERFORMANCE STATUS SCALE DEFINITIONS RATING (%) CRITERIA

activity and to work; minor signs or symptoms of

A performance status of 0 means no restrictions in the sense that someone is

Source: Karnofsky and Burchenal.²⁷

Unstable to de novo self-cure 5. Death 100. No treatment or evidence

disease-specific Clinical Summary. The score is to documented where indicated on the clinical summary. The KPS is to be completed for a patient any time there are significant changes in status. The score should then be documented in the clinical note.

Please be aware that the KPS has only been validated as a predictor of terminal decline in cancer and HIV patients. It can be completed for other patients if the score indicates a declining functional ability. Review the scale: The Karnofsky Performance Scale ranges from 0-100 and is broken down into 10-point increments. The higher the score, the more independent the person is. Observe daily activities: Observe the patient's ability to perform daily activities such as dressing, bathing, eating, and walking. Evaluate symptoms: Evaluate the patient's symptoms, such as pain, shortness of breath, and nausea, and how they impact daily activities. Assign a score: Assign a score based on the patient's ability to perform daily activities and their symptom severity. For example, a score of 100 indicates the person can perform all activities without assistance and has no symptoms. A score of 50 indicates the person is able to perform only half of their daily activities and has significant symptoms. Document the score: Document the score in the patient's medical record and use it as a baseline for future assessments. Re-evaluate regularly: Re-evaluate the patient's functional status and symptoms regularly, especially if there is a change in their condition. Use the scale in conjunction with other assessments: The Karnofsky Performance Scale should be used in conjunction with other assessments and clinical observations to provide a comprehensive evaluation of the patient's functional status. Involve the patient and caregivers: Involve the patient and their caregivers in the assessment process to ensure accuracy and relevance. By following these steps, you can use the Karnofsky Performance Scale to assess a person's independent functioning and track their progress over time. The following questions can begin to serve as guidelines for determining the performance status of an individual patient. Evidence of Disease: Has there been any weight loss or weight gain? Has there been any reduction in energy or increase in fatigue? Self Care Has there been any difficulty grooming or bathing? Daily Activities Has there been any difficulty in walking or moving around? Has there been any difficulty driving? Work Difficulty Has there been any difficulty working full or part time? The information obtained from these questions, the assessment and other medical data should then be used as specific criteria listed on the KPS Index. Once the criteria have been identified and the index which most closely corresponds to the criteria has been chosen, the KPS is documented. Following the admission assessment, when possible, the same health care provider should administer the scale on subsequent evaluations. If you found this article informative and useful share it with your friends and colleagues.