Stage	Deficits in Cognition and Functions	Usual Care Setting
1	Subjectively and objectively normal	Independent
2	Subjective complaints of mild memory loss.	Independent
	Objectively normal on testing.	
	No functional deficit.	
3	Mild Cognitive Impairment (MCI)	Independent
	Earliest clear-cut deficits.	
	Functionally normal but co-workers may be	
	aware of declining work performance.	
	Objective deficits on testing.	
	Denial may appear.	
4	Early Dementia	Might live independently
	Clear-cut deficits on careful clinical interview	perhaps with assistance
	Difficulty performing complex tasks, e.g.	from family or caregivers
	handling finances, traveling.	
	Denial is common. Withdrawal from	
	challenging situations.	
5	Moderate Dementia	At home with live-in
	Can no longer survive without some assistance.	family member.
	Unable to recall major relevant aspects of	In seniors' residence with
	their current lives, e.g. an address or telephone	home support.
	number of many years, names of grandchildren, etc.	Possibly in facility care,
	Some disorientation to date, day of week, season, or	especially if behavioural
	to place. They require no assistance with toileting,	problems or comorbid physical
	eating or dressing but may need help choosing	disabilities.
6	appropriate clothing.	Mast often in Complex Core
6	Moderately Severe Dementia	Most often in Complex Care
	May occasionally forget name of spouse.	facility
	Largely unaware of recent experiences and events	
	in their lives.	
	Will require assistance with basic ADLs. May be incontinent of urine.	
	Behavioural and psychological syptoms of dementia	
	(BPSD) are common, e.g. delusions, repetitive	
7	behaviours, agitation. Severe Dementia	Complex Care
/	Verbal abilities will be lost over the course of this	Complex Care
	stage.	
	Incontinent. Needs assistance with feeding.	
	Lose ability to walk.	
	based on Reisberg scale	
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