Cancer afflicts mainly the elderly. Nearly 60% of cancer patients are over the age of 65 years old. Cancer treatment can be toxic and as such it is important to be able to select the right treatment for the right patient. Elderly cancer patients form a very heterogeneous group in terms of their functional status and ability to tolerate cancer treatment. We have realised that age and currently available functional status scales alone (like ECOG or Karnofsky) or in combination is not accurate in stratifying these patients. There has been much research done in this area and we have found that the comprehensive geriatric assessment and its various domains have not only been able to predict prognosis in this group of patients quite accurately but also be used in evaluating and treating these patients whilst improving their outcomes. A number of CGA scales have been developed to help these patients, however many physicians find it time consuming and cumbersome. As such a number of screening tools have been developed to help physicians select the right patients for a full CGA. Here we will review the recent data and discuss the latest CGA tools available and how its use, together with selection of the right intervention can impact cancer treatment in this vulnerable group of patients.