

Frequent Hemodialysis Network PHYSICAL FUNCTION MEASURES QUESTIONS - FORM #234

Instructions: Review detailed instructions in MOP on how to conduct these physical function tests. A stopwatch is needed. The computer will calculate the number of points assigned to each test and report the scores in items 13a-e.

Schedule: Daily: Baseline, F-4 and F-12.

Nocturnal v3.0: Baseline, F-4 and F-12. (Nocturnal v2.1: Baseline, F-5 and F-14).

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1. Participant ID #					2. Alpha Code		3a. Visit Type	3b. Visit Number		4. Date of assessment: dd/mon/yyyy									

4b. Time of assessment? (24 hr clock)..... _ _ : _ _

c. How does this patient ambulate/move around?
(1=Unassisted, 2=Walker, 3=Cane, 4=Wheelchair)

All of the tests should be performed in the same order as they are presented. Instructions to the participant are shown in bold italic and should be given exactly as they are written in this script.

BALANCE TESTS (Record number of seconds each position is held.)

The participant must be able to stand unassisted without the use of a cane or walker. You may help the participant to get up.

***Examiner:* "Now let's begin the evaluation. I would now like you to try to move your body in different movements. I will first describe and show each movement to you. Then I'd like you to try to do it. If you cannot do a particular movement, or if you feel it would be unsafe to try to do it, tell me and we'll move on to the next one. Let me emphasize that I do not want you to try to do any exercise that you feel might be unsafe"**

"Do you have any questions before we begin?"

- ***"Now I will show you the first movement"*** (Demonstrate) ***"I want you to try to stand with your feet together, side-by-side, for about 10 seconds."***
- ***"You may use your arms, bend your knees, or move your body to maintain your balance, but try not to move your feet. Try to hold this position until I tell you to stop."***
- Stand next to the participant to help him/her into the side-by-side position. Supply just enough support to the participant's arm to prevent loss of balance.
- When the participant has his/her feet together, ask ***"Are you ready?"***
- Then let go and begin timing as you say, ***"Ready, begin."***

- Stop the stopwatch and say **“Stop”** after 10 seconds or when the participant steps out of position or grabs your arm.
- If participant is unable to hold the position for 10 seconds, record result in Item #5 and go to the gait speed test.

5. Results: Side-by-side stand (seconds)....._____ (Ideal is to hold position for 10 seconds. If balance test is not attempted, record '99.99' and answer question 8. End balance tests.)

- ***“Now I will show you the second movement. (Demonstrate) I want you to try to stand with the side of the heel of one foot touching the big toe of the other foot for about 10 seconds. You may put either foot in front, whichever is more comfortable for you.”***
- ***“You may use your arms, bend your knees, or move your body to maintain your balance, but try not to move your feet. Try to hold this position until I tell you to stop.”***
- Stand next to the participant to help him/her into the semi-tandem position. Supply just enough support to the participant’s arm to prevent loss of balance.
- When the participant has his/her feet together, ask **“Are you ready?”**
- Then let go and begin timing as you **“Ready, begin.”**
- Stop the stopwatch and say **“Stop”** after 10 seconds or when the participant steps out of position or grabs your arm.
- If participant is unable to hold the position for 10 seconds, record result in Item #6 and go to the gait speed test.

6. Results: Semi-tandem stand (seconds)....._____ (Ideal is to hold position for 10 seconds. If balance test is not attempted, record '99.99' and answer question 8. End balance tests.)

- ***“Now I will show you the third movement”. (Demonstrate) “I want you to try to stand with heel of one foot in front of and touching the toes of the other foot for about 10 seconds. You may put either foot in front, whichever is more comfortable for you.”***
- ***“You may use your arms, bend your knees, or move your body to maintain your balance, but try not to move your feet. Try to hold this position until I tell you to stop.”***
- Stand next to the participant to help him/her into the tandem position. Supply just enough support to the participant’s arm to prevent loss of balance.
- When the participant has his/her feet together, ask **“Are you ready?”**
- Then let go and begin timing as you say, **“Ready, begin.”**

- Stop the stopwatch and say “**Stop**” after 10 seconds or when the participant steps out of position or grabs your arm.
- Record the number of seconds in item #7.

7. Results: Tandem stand (seconds)....._____.
(Ideal is to hold position for 10 seconds. If balance test is not attempted, record '99.99' and answer question 8. End balance tests.)

8. If participant did not attempt test or failed the test, identify reason why:....._____
 0=N/A, patient completed test
 1=Tried but unable to perform test
 2=Participant could not hold position unassisted
 3=Not attempted, you (person conducting test) felt unsafe
 4=Not attempted, participant felt unsafe
 5=Participant unable to understand instructions
 6=Participant refused

GAIT SPEED TEST Observe participant’s normal walk. A cane or other walking aid may be used, if needed.

- *"Now I am going to observe how you normally walk. If you use a cane or other walking aid and you feel you need it to walk a short distance, then you may use it."*
- *"This is our walking course. I want you to walk to the other end of the course at your usual speed, just as if you were walking down the street to go to the store."*
- Demonstrate the walk for the participant.
- *"Walk all the way past the other end of the tape before you stop. I will walk with you. Do you feel this would be safe?"*
- Have the participant stand with both feet touching the starting line.
- *"When I want you to start, I will say: **Ready, begin.**"* When the participant acknowledges this instruction say: ***“Ready, begin.”***
- Press the start/stop button to start the stopwatch as the participant begins walking. Walk behind and to the side of the participant.
- Stop timing when one of the participant’s feet is completely across the end line and record the number of seconds in Item 9a.

First Gait Test

9. a. Results: Time (in seconds) for first gait speed test over 4 meters
If unable to complete test or test refused, enter "00.00"
- b. Did patient not attempt or failed test? (0=No, 1=Yes)
- c. Why did patient not attempt or failed test?.....
0=N/A, patient completed test
1=Tried but unable
2=Participant could not walk unassisted
3=Not attempted, you (examiner) felt unsafe
4=Not attempted, participant felt unsafe
5=Participant unable to understand instructions
6=Participant refused
- d. Aids used for first walk?.....
0=None
1=Cane
2=Walker
3=Other, specify:.....
4=N/A, patient did not attempt test
- e. Does examiner have any comments? (0=No, 1=Yes).....
Specify: _____

Second Gait Speed Test

- *"Now I want you to repeat the walk. Remember to walk at your usual pace, and go all the way past the other end of the course."*
 - Have the participant stand with both feet touching the starting line.
 - *"When I want you to start, I will say: Ready, begin."* When the participant acknowledges this instruction say: *"Ready, begin."*
 - Press the start/stop button to start the stopwatch as the participant begins walking. Walk behind and to side of the participant.
 - Stop timing when one of the participant's feet is completely across the end line. Record results in Item 10a.
10. a. Results: time (in seconds) for second gait speed test over 4 meters
If unable to complete test or test refused, enter "00.00"
- b. Did patient not attempt or failed test? (0=No, 1=Yes)

- c. Why did patient not attempt or failed test?.....
 0=N/A, patient completed test
 1=Tried but unable
 2=Participant could not walk unassisted
 3=Not attempted, you (examiner) felt unsafe
 4=Not attempted, participant felt unsafe
 5=Participant unable to understand instructions
 6=Participant refused
- d. Aids used for second walk?
 0=None
 1=Cane
 2=Walker
 3=Other, specify: _____
 4=N/A, patient did not attempt test
- e. Does examiner have any comments? (0=No, 1=Yes).....
 Specify: _____

CHAIR STAND TEST This test measures the strength of the participant's legs. Arms should be folded across chest. If participant cannot rise without using arms, the test is finished. See also other reasons for discontinuing test.

Single Chair Stand

- *"Let's do the last movement test. Do you think it would be safe for you to try to stand up from a chair without using your arms?"*
- *"The next test measures the strength in your legs."*
- (Demonstrate and explain the procedure.) *"First, fold your arms across your chest and sit so that your feet are on the floor; then stand up keeping your arms folded across your chest".*
- *"Please stand up keeping your arms folded across your chest."* (Record result).
- If participant cannot rise without using arms, say *"Okay, try to stand up using your arms."* This is the end of their test. Record result in item #11a and to the scoring page.

Single Chair Stand Test Results

11. a. Did participant feel safe to stand without help? (0=No, 1=Yes)
- b. Results of single chair stand test.....
 1=Participant stood without using arms (continue with repeated chair stand test)
 2=Participant used arms to stand (end test)
 3=Participant could not complete test (end test)

- c. Why did patient not attempt or failed test?.....
 0=N/A, patient completed test, go to question 12
 1=Tried but unable, go to question 103
 2=Participant could not walk unassisted, go to question 103
 3=Not attempted, you (examiner) felt unsafe, go to question 103
 4=Not attempted, participant felt unsafe, go to question 103
 5=Participant unable to understand instructions, go to question 103
 6=Participant refused, go to question 103

Repeated Chair Stand Test

- ***"Do you think it would be safe for you to try to stand up from a chair five times without using your arms?"***
 - (Demonstrate and explain the procedure): ***"Please stand up straight as QUICKLY as you can five times, without stopping in between. After standing up each time, sit down and then stand up again. Keep your arms folded across your chest. I'll be timing you with a stopwatch"***
 - When the participant is properly seated, say: ***"Ready? Stand"*** and begin timing.
 - Count out loud as the participant arises each time, up to five times.
 - Stop if participant becomes tired or short of breath during repeated chair stands.
 - Stop the stopwatch when he/she has straightened up completely for the fifth time.
 - Also stop:
 - If participant uses his/her arms
 - After 1 minute, if participant has not completed rises
 - At your discretion, if concerned for participant's safety
 - If the participant stops and appears to be fatigued before completing the five stands, confirm this by asking ***"Can you continue?"***
 - If participant says "Yes," continue timing. If participant says "no", stop and reset the stopwatch.
12. a. Did participant feel safe to stand five times? (0=No, 1=Yes)
- b. Results: time (in seconds) for repeated chair stand test
 If unable to complete test or test refused, enter "00.00"
- c. Results of repeated chair stand test.....
 1=Participant stood without using arms
 2=Participant used arms to stand (end test. go to question 103)
 3=Participant could not complete test (end test- go to question 103)

- d. Why did patient not attempt or failed test?.....
 - 0=N/A, patient completed test, go to question 103
 - 1=Tried but unable, go to question 103
 - 2=Participant could not walk unassisted, go to question 103
 - 3=Not attempted, you (examiner) felt unsafe, go to question 103
 - 4=Not attempted, participant felt unsafe, go to question 103
 - 5=Participant unable to understand instructions, go to question 103
 - 6=Participant refused, go to question 103

Patient testing is now complete.

Study Staff continue:

- 100. Language used to complete this form? (1=English, 2=Spanish)
- 103. Setting where this form was completed?

 - 1=Patient was tested at home
 - 2=Patient was tested at the dialysis unit
 - 3=Patient was tested in another clinical setting

- 104. Identify reason this entire instrument was not completed?.....
 - 1=N/A, instrument was completed.
 - 2=See reasons described in sections above.
 - 3=Attempted but unable to be completed - patient too sick.
 - 4=Attempted but unable to be completed - patient did not want to be bothered at this time
 - 5=Unable. Patient in hospital.
 - 6=Unable. Patient withdrew consent.
 - 7=Staff logistics
 - 8=Pt. disabled, uses wheelchair only
- 200. Date this form completed (dd/mon/yyyy) ____/____/____
- 201. Username of certified person who performed this test..... _____

For Clinical Center Use Only:

- 202. Username of person entering this form: _____
- 203. Date entered: (dd/mon/yyyy) ____/____/____