Subject ID:						Visit Date:						
	Centre		Pá	atient	ID	•	УУ	у у	 m	m	d	d

Patient Screening Form

1. Interviewer's Initials:	
2. Signed Consent Form:	Yes No
3. Date of Consent:	yyyy mm dd
4. Gender:	Male Female
5. Date of Birth:	yyyy mm dd
6. Confirmation that patient will be discharged to local inpatient stroke rehab:	Yes No
Date Physiatry consult completed:	yyyy mm dd

Subject ID:	Visit Date:			
Centre Patient ID		уууу	m m	d d
Inclusion Criteria				
Participant is included in the study	y if:			
			Yes	No
a) Within 4 weeks post hemorrhagic	or ischemic CVA:			
b) Pre-stroke disability <2 (less than	2) on the Modified Rankin Scale	€.		
c) Able to ambulate at least 15 feet (sand/or orthotic device and maximum		ve		
d) Overground walking speed less th	an 1.0m/s (over a 5 m distance))		
e) Able to understand and follow dire	ections			
f) Greater than or equal to 19 years	of age.			

Subject ID:						Visit Date:						
	Ce	ntre	Pa	tient	ID		у у	у у	m	m —	d	d

Exclusion Criteria

Participant is excluded in the study if:

	Yes	No
a) Pre-stroke health included a gait disorder or disease that affected ambulation (musculoskeletal conditions, amputation, etc.)		
b) Pre-stroke health included a neurological condition (such as Parkinson's disease or Multiple Sclerosis) or other serious medical condition (active cancer, uncontrolled diabetes)		
c) Excessive pain in the body/joint preventing participation in an exercise intervention.		
d) Participating in an experimental drug field study.		
e) Participating in another formal exercise rehabilitation clinical trial.		
10. Participant meets study criteria and would like to proceed with study.		
11. Participant meets study criteria, but does not want to proceed with study.		
Comment:		
12. Participant does not meet study criteria AT THIS TIME, but would like to be re-evaluated for the study in one week.		
Comment:		
13. Participant does not meet study criteria.		
Comment:		

Subject ID:	Visit Da	te:	
Centre Patient ID		уууу	mm dd
Participant Randomization Form			
1. Interviewer's Initials:			
Gender:	Male	Female	
Date of Birth:	уууу	m m d d	
FIM Transfer Status:	≥ 5 (Greater t	han or equal to 5)	<pre>< (Less than 5)</pre>
Study Site:	GF Strong	Holy Family	Fanning
	Foothills	Toronto Rehab	
Age:	≥ 60 (Greater	than or equal to 60)	< 60 (Less than 60)
Meets all study inclusion criteria (Participant Screening Form):	Yes	No	