

Protocol ID: _____

Study Name: _____

Site: _____

Event Name: _____

Event Date: _____

Study Subject ID: _____

Interviewer Name: _____

Interview Date: _____

BLSA GAIT - Ver. 1.5**Section Title: Steady State Walks****Instructions:**

Date Completed

☐ Blank

Tester ID

Were shoes worn during this test ☐ Yes ☐ No [Click to deselect entry](#)Was a walking aid used? ☐ Yes ☐ No [Click to deselect entry](#) Type of walking aid:Status of Gait Lab Testing: ☐ Attempted ☐ Not attempted[Click to deselect entry](#)

Reason Gait lab Testing not done

- ☐ 1-Not enough time/not scheduled
- ☐ 2-No examiner
- ☐ 3-Technical/equipment problem
- ☐ 4-Cognitively impaired
- ☐ 5-Unable to stand/walk unaided
- ☐ 6-Examiner felt unsafe
- ☐ 7-Participant refused
- ☐ 8-Reason unknown
- ☐ 9-Other Physical Problems

Obtain Height and Weight from current physical

Was accelerometer worn during this test? ☐ Yes ☐ No [Click to deselect entry](#)

Was Zeno Walkway used to record GAIT? ☐ Yes ☐ No [Click to deselect entry](#)

Was Vicon used to record GAIT? ☐ Yes ☐ No [Click to deselect entry](#)

Examiner Note: Indicate the completion status for each trial of each test conducted in the Gait Lab. If a test was incomplete or not administered, record the reason not done.

QUIET STANCE/STATIC STAND

Eyes open

Positive Trial:

☐ Complete ☐ Incomplete/Not done

[Click to
deselect entry](#)

Reason not done:

- ☐ 1-Not enough time
- ☐ 2-No examiner/room available
- ☐ 3-Technical problem
- ☐ 4-Participant unable to understand instructions
- ☐ 5-Unable to stand/walk unaided
- ☐ 6-Examiner felt it was unsafe
- ☐ 7-Refused
- ☐ 8-Reason unknown

Negative Trial:

☐ Complete ☐ Incomplete/Not done

[Click to
deselect entry](#)

Reason not done:

- ☐ 1-Not enough time
- ☐ 2-No examiner/room available
- ☐ 3-Technical problem
- ☐ 4-Participant unable to understand instructions
- ☐ 5-Unable to stand/walk unaided
- ☐ 6-Examiner felt it was unsafe
- ☐ 7-Refused
- ☐ 8-Reason unknown

NORMAL AND FAST STEADY STATE WALKS

Normal Pace:☐ Complete ☐
Incomplete/Not doneClick to
deselect entry

Reason not done:

- ☐ 1-Not enough time
- ☐ 2-No examiner/room available
- ☐ 3-Technical problem
- ☐ 4-Participant unable to understand instructions
- ☐ 5-Unable to stand/walk unaided
- ☐ 6-Examiner felt it was unsafe
- ☐ 7-Refused
- ☐ 8-Reason unknown

Number of Trials:

Serial 1's

I would like you to count backwards from 200 by 1's. Continue counting backwards until I tell you to stop.

Counted: ☐ 200 ☐ 199 ☐ 198 ☐ 197 ☐ 196 ☐ 195 ☐ 194 ☐ 193 ☐ 192 ☐ 191 ☐ 190 ☐ 189 ☐ 188 ☐ 187 ☐ 186 ☐
185 ☐ 184 ☐ 183 ☐ 182 ☐ 181 ☐ 180 ☐ 179 ☐ 178 ☐ 177Errors: ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6

Total # of subtractions:

Total correct:

Total errors:

Comments

Animal Fluency

Next, I would like you to name aloud as many different animals (fluency test) as you can think of.

Animal fluency letter: ☐ B ☐ L ☐ D ☐ C ☐ M Click to deselect entry

Total animal names: (including repetitions)

Total duplicate animal names:

Fast Pace:

☐ Complete ☐
Incomplete/Not done

Click to
deselect entry

Reason not done:

- ☐ 1-Not enough time
- ☐ 2-No examiner/room available
- ☐ 3-Technical problem
- ☐ 4-Participant unable to understand instructions
- ☐ 5-Unable to stand/walk unaided
- ☐ 6-Examiner felt it was unsafe
- ☐ 7-Refused
- ☐ 8-Reason unknown

Number of Trials:

Protocol ID: _____

Study Name: _____

Site: _____

Event Name: _____

Event Date: _____

Study Subject ID: _____

Interviewer Name: _____

Interview Date: _____

Section Title: Normal Pace Walks**Instructions:****NORMAL PACE WALKS WITH OBSTACLE***If using Zeno, was clicker used to mark heel strike before obstacle crossing?***Trial 1**☐ Complete ☐
Incomplete/Not doneClick to
deselect entry

Reason not done:

- ☐ 1-Not enough time
- ☐ 2-No examiner/room available
- ☐ 3-Technical problem
- ☐ 4-Participant unable to understand instructions
- ☐ 5-Unable to stand/walk unaided
- ☐ 6-Examiner felt it was unsafe
- ☐ 7-Refused
- ☐ 8-Reason unknown

Clicker used?

☐ Yes ☐ No ☐ N/A Vicon used**Trial 2**☐ Complete ☐
Incomplete/Not doneClick to
deselect entry

Reason not done:

- ☐ 1-Not enough time
☐ 2-No examiner/room available
☐ 3-Technical problem
☐ 4-Participant unable to understand instructions
☐ 5-Unable to stand/walk unaided
☐ 6-Examiner felt it was unsafe
☐ 7-Refused
☐ 8-Reason unknown

Clicker used?

☐ Yes ☐ No ☐ N/A Vicon used**Trial 3**☐ Complete ☐ Incomplete/Not doneClick to
deselect entry

Reason not done:

- ☐ 1-Not enough time
☐ 2-No examiner/room available
☐ 3-Technical problem
☐ 4-Participant unable to understand instructions
☐ 5-Unable to stand/walk unaided
☐ 6-Examiner felt it was unsafe
☐ 7-Refused
☐ 8-Reason unknown

Clicker used?

☐ Yes ☐ No ☐ N/A Vicon used**Trial 4**☐ Complete ☐ Incomplete/Not doneClick to
deselect entry

Reason not done:

- ☐ 1-Not enough time
☐ 2-No examiner/room available
☐ 3-Technical problem
☐ 4-Participant unable to understand instructions
☐ 5-Unable to stand/walk unaided
☐ 6-Examiner felt it was unsafe
☐ 7-Refused
☐ 8-Reason unknown

Clicker used? ☐ Yes ☐ No ☐ N/A Vicon used

Pain Assessment:

Ask the participant after the test if him/her had any pain during the tests

Pain Assessment: ☐ Any pain (specify place and severity)
☐ No pain during the tests
☐ Don't know
☐ Refused

Feet:

Which Foot: ☐ Right ☐ Left ☐ Both [Click to deselect entry](#)

Pain Severity Right: ☐ 0-None ☐ 1-Mild ☐ 2-Moderate ☐ 3-Severe ☐ 4-Extreme ☐ 8-Don't know [Click to deselect entry](#)

Pain Severity Left: ☐ 0-None ☐ 1-Mild ☐ 2-Moderate ☐ 3-Severe ☐ 4-Extreme ☐ 8-Don't know [Click to deselect entry](#)

Ankles:

Which Ankle: ☐ Right ☐ Left ☐ Both [Click to deselect entry](#)

Pain Severity Right: ☐ 0-None ☐ 1-Mild ☐ 2-Moderate ☐ 3-Severe ☐ 4-Extreme ☐ 8-Don't know [Click to deselect entry](#)

Pain Severity Left: ☐ 0-None ☐ 1-Mild ☐ 2-Moderate ☐ 3-Severe ☐ 4-Extreme ☐ 8-Don't know [Click to deselect entry](#)

Knees:

Which knee: ☐ Right ☐ Left ☐ Both [Click to deselect entry](#)

Pain Severity Right: ☐ 0-None ☐ 1-Mild ☐ 2-Moderate ☐ 3-Severe ☐ 4-Extreme ☐ 8-Don't know [Click to deselect entry](#)

Pain Severity Left: ☐ 0-None ☐ 1-Mild ☐ 2-Moderate ☐ 3-Severe ☐ 4-Extreme ☐ 8-Don't know [Click to deselect entry](#)

Hips:

Which hip: ☐ Right ☐ Left ☐ Both [Click to deselect entry](#)

Pain Severity Right: ☐ 0-None ☐ 1-Mild ☐ 2-Moderate ☐ 3-Severe ☐ 4-Extreme ☐ 8-Don't know [Click to deselect entry](#)

Pain Severity Left:

☐ 0-None ☐ 1-Mild ☐ 2-Moderate ☐ 3-Severe ☐ 4-Extreme ☐ 8-Don't know[Click to deselect entry](#)**Back:**

Pain Back:

☐ Yes [Click to deselect entry](#)

Pain Severity:

☐ 0-None ☐ 1-Mild ☐ 2-Moderate ☐ 3-Severe ☐ 4-Extreme ☐ 8-Don't know[Click to deselect entry](#)**Examiner Note:***In addition to general comments, please indicate any difficulty participant had in crossing obstacle.*

Comments