

Protocol ID: _____

Study Name: _____

Site: _____

Event Name: _____

Event Date: _____

Study Subject ID: _____

Interviewer Name: _____

Interview Date: _____

BLSA GAIT - Ver. 1.3**Section Title: Steady State Walks****Instructions:**

Date Completed

☐ Blank

Tester ID

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

Was Zeno Walkway used to record ☐ Yes ☐ No Click to deselect entry
GAIT?

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

Walking aid used:

☐ Yes ☐ No

Click to deselect entry

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

Walking aid used:

☐ Yes ☐ No

Click to deselect entry

NORMAL AND FAST STEADY STATE WALKS

Normal 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:

Walking aid used:

☐ Yes ☐ No Click to deselect entry

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:

Walking aid used:

☐ Yes ☐ No Click to deselect entry

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

Walking aid used:

☐ Yes ☐ No Click to deselect entry**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

Walking aid used:

☐ Yes ☐ No [Click to deselect entry](#)**Trial 3**☐ 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

Clicker used?

☐ Yes ☐ No ☐ N/A Vicon used

Walking aid used:

☐ Yes ☐ No [Click to deselect entry](#)**Trial 4**☐ 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

Clicker used?

☐ Yes ☐ No ☐ N/A Vicon used

Walking aid used:

☐ Yes ☐ No[Click to deselect entry](#)**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