

CLINICAL INFORMATION: Standing & Walking Mobility

CI-Standing & Walking Mobility-mMiniBESTest-MULT

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Modified Mini-BESTest- of DYNAMIC BALANCE:

Balance Evaluation Systems Test

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	ADMISSION (Within 7 days)	THRESHOLD (Within 2 days of meeting criterion*)	DISCHARGE (Within 7 days)
Date: (If completed over multiple sessions, enter date of completion)	YYYY-MM-DD	YYYY-MM-DD	YYYY-MM-DD
Therapist Name/Initials:			
Did patient meet threshold criterion at time of assessment? *2B) Requires Moderate Assist (25-50% of total effort) during therapeutic walking. Note: if patient doesn't meet threshold criterion at admission, please monitor and perform threshold test if function changes	<input type="checkbox"/> Yes <input type="checkbox"/> No	N/A; only performed if patient meets threshold criterion	<input type="checkbox"/> Yes <input type="checkbox"/> No
If patient met threshold criterion, but test not performed, specify reason:	Reason:	Reason:	Reason:
Number of sessions test completed over: Note: Test can be completed over multiple sessions during the time period indicated if required.			

Modified Mini-BESTest

	ADMISSION (Within 7 days) OR THRESHOLD (Within 2 days of meeting criterion*) (Circle which test was done)	DISCHARGE (Within 7 days)		
ITEM	Patient should remove foot/ankle bracing for entire test.		PATIENT INSTRUCTIONS	THERAPIST INSTRUCTIONS
ANTICIPATORY	SUB SCORE: /6	SUB SCORE: /6		
1. SIT TO STAND				
(2) Normal: Comes to stand without use of hands and stabilizes independently. (1) Moderate: Comes to stand WITH use of hands on first attempt. (0) Severe: Impossible to stand up from chair without assistance, OR several attempts with use of hands.			"Cross arms across your chest. Try not to use your hands unless you must. Do not let your legs lean against the back of the chair when you stand. Please stand up now."	Note the initiation of the movement, and the use of the subject's hands on the seat of the chair, the thighs, or the thrusting of the arms forward.
2. RISE TO TOES				
(2) Normal: Stable for 3 s with maximum height. (1) Moderate: Heels up, but not full range (smaller than when holding hands), OR noticeable instability for 3s. (0) Severe: < 3 s.			"Place your feet shoulder width apart. Place your hands on your hips. Try to rise as high as you can onto your toes. I will count out loud to 3 seconds. Try to hold this pose for at least 3 seconds. Look straight ahead. Rise now."	Allow the subject two attempts. Score the best attempt. (If you suspect that subject is using less than full height, ask the subject to rise up while holding the examiners' hands.) Make sure the subject looks at a non-moving target 4-12 feet away.

ITEM	ADMISSION (Within 7 days) OR THRESHOLD (Within 2 days of meeting criterion*)		DISCHARGE (Within 7 days)		PATIENT INSTRUCTIONS	THERAPIST INSTRUCTIONS
3. STAND ON ONE LEG Use the trial with the longest time to determine score below on each side. (2) Normal: 20 s. (1) Moderate: < 20 s. (0) Severe: Unable.	Left Side (Standing Leg)	Right Side (Standing Leg)	Left Side (Standing Leg)	Right Side (Standing Leg)	"Look straight ahead. Keep your hands on your hips. Lift your leg off of the ground behind you without touching or resting your raised leg upon your other standing leg. Stay standing on one leg as long as you can. Look straight ahead. Lift now."	Allow the subject two attempts and record the times. Record the number of seconds the subject can hold up to a maximum of 20 seconds. Stop timing when the subject moves hands off of hips or puts a foot down. Make sure the subject looks at a non- moving target 4-12 feet ahead. Repeat on other side.
	Trial 1: _____ sec.	Trial 1: _____ sec.	Trial 1: _____ sec.	Trial 1: _____ sec.		
	Trial 2: _____ sec.	Trial 2: _____ sec.	Trial 2: _____ sec.	Trial 2: _____ sec.		
	L SCORE:	R SCORE:	L SCORE:	R SCORE:		
	Only use the side with the lowest score to calculate sub-score and total score.		Only use the side with the lowest score to calculate sub-score and total score.			
	LOWEST SCORE:		LOWEST SCORE:			
REACTIVE POSTURAL CONTROL			SUB SCORE: /6		SUB SCORE: /6	
4. COMPENSATORY STEPPING CORRECTION- FORWARD (2) Normal: Recovers independently a single, large step (second realignment step is allowed) (1) Moderate: More than one step used to recover equilibrium. (0) Severe: No step, OR would fall if not caught, OR falls spontaneously.					"Stand with your feet shoulder width apart, arms at your sides. Lean forward against my hands beyond your forward limits. When I let go, do whatever is necessary, including taking a step, to avoid a fall."	Stand in front of the subject with one hand on each shoulder and ask the subject to lean forward (Make sure there is room for them to step forward). Require the subject to lean until the subject's shoulders and hips are in front of toes. After you feel the subject's body weight in your hands, very suddenly release your support. The test must elicit a step. NOTE: Be prepared to catch subject.
5. COMPENSATORY STEPPING CORRECTION- BACKWARD (2) Normal: Recovers independently a single, large step (a second realignment step is allowed and not counted). (1) Moderate: More than one step used to recover equilibrium. (0) Severe: No step, OR would fall if not caught, OR falls spontaneously.					"Stand with your feet shoulder width apart, arms at your sides. Lean backward against my hands beyond your backward limits. When I let go, do whatever is necessary, including taking a step, to avoid a fall."	Stand behind the subject with one hand on each scapula and ask the subject to lean backward (Make sure there is room for the subject to step backward.) Require the subject to lean until their shoulders and hips are in back of their heels. After you feel the subject's body weight in your hands, very suddenly release your support. Test must elicit a step. NOTE: Be prepared to catch subject.

<p>6. COMPENSATORY STEPPING CORRECTION- LATERAL</p> <p>(2) Normal: Recovers independently with 1 step (crossover or lateral OK as is a second realignment step).</p> <p>(1) Moderate: Several steps to recover equilibrium.</p> <p>(0) Severe: Falls, or cannot step.</p>	<p>Left</p> <p>Only use the side with the lowest score to calculate sub-score and total score.</p> <p>LOWEST SCORE:</p>	<p>Right</p> <p>Only use the side with the lowest score to calculate sub-score and total score.</p> <p>LOWEST SCORE:</p>	<p>Left</p> <p>Only use the side with the lowest score to calculate sub-score and total score.</p> <p>LOWEST SCORE:</p>	<p><i>"Stand with your feet together, arms down at your sides. Lean into my hand beyond your sideways limit. When I let go, do whatever is necessary, including taking a step, avoid a fall."</i></p>	<p><i>Stand to the side of the subject, place one hand on the side of the subject's pelvis, and have the subject lean the whole body into your hands. Require the subject to lean until the midline of the pelvis is over the right (or left) foot and then suddenly release your hold. NOTE: Be prepared to catch subject.</i></p>
<p>ITEM</p>	<p>ADMISSION (Within 7 days) OR THRESHOLD (Within 2 days of meeting criterion*)</p>		<p>DISCHARGE (Within 7 days)</p>	<p>PATIENT INSTRUCTIONS</p>	<p>THERAPIST INSTRUCTIONS</p>
<p>SENSORY ORIENTATION</p>	<p>SUB SCORE: /6</p>		<p>SUB SCORE: /6</p>		
<p>7. STANCE (FEET TOGETHER); EYES OPEN, FIRM SURFACE</p> <p>(2) Normal: 30 s.</p> <p>(1) Moderate: < 30 s.</p> <p>(0) Severe: Unable</p>	<p>_____ sec.</p>		<p>_____ sec.</p>	<p><i>"Place your hands on your hips. Place your feet together until almost touching. Look straight ahead. Be as stable and as still as possible, until I say stop."</i></p>	<p><i>Record the time the subject was able to stand with feet together up to a maximum of 30 seconds. Make sure subject looks at a non-moving target 4-12 feet away. If the subject is able to achieve a time of 30 seconds in the first trial, a second trial is not required.</i></p>
	<p>SCORE:</p>		<p>SCORE:</p>		
<p>8. STANCE (FEET TOGETHER); EYES CLOSED, FOAM SURFACE</p> <p>(2) Normal: 30 s.</p> <p>(1) Moderate: < 30 s.</p> <p>(0) Severe: Unable</p>	<p>_____ sec.</p>		<p>_____ sec.</p>	<p><i>"Step onto the foam. Place your hands on your hips. Place your feet together until almost touching. Be as stable and as still as possible, until I say stop. I will start timing when you close your eyes."</i></p>	<p><i>Use medium density Temper® foam, 4 inches thick. Assist subject in stepping onto foam. Record the time the subject was able to stand in each trial to a maximum of 30 seconds. Have the subject step off the foam between trials. Flip the foam over between each trial to ensure the foam has retained its shape. If the subject is able to achieve a time of 30 seconds in the first trial, a second trial is not required.</i></p>
	<p>SCORE:</p>		<p>SCORE:</p>		
<p>9. INCLINE- EYES CLOSED</p> <p>(2) Normal: Stands independently 30 s and aligns with gravity.</p> <p>(1) Moderate: Stands independently <30 s OR aligns with surface</p> <p>(0) Severe: Unable.</p>	<p>_____ sec.</p>		<p>_____ sec.</p>	<p><i>"Step onto the incline ramp. Please stand on the incline ramp with your toes toward the top. Place your feet shoulder width apart and have your arms down at your sides. I will start timing when you close your eyes."</i></p>	<p><i>Aid the subject onto the ramp. Once the subject closes eyes, begin timing and record time. Note if there is excessive sway. If the subject is able to achieve a time of 30 seconds in the first trial, a second trial is not required.</i></p>
	<p>SCORE:</p>		<p>SCORE:</p>		

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DYNAMIC GAIT	SUB SCORE: /10	SUB SCORE: /10		
10. CHANGE IN GAIT SPEED (2) Normal: Significantly changes walking speed without imbalance. (1) Moderate: Unable to change walking speed or signs of imbalance. (0) Severe: Unable to achieve significant change in speed AND signs of imbalance.			<i>"Begin walking at your normal speed, when I tell you 'fast' walk as fast as you can. When I say 'slow', walk very slowly."</i>	<i>Allow the subject to take 3-5 steps at normal speed, and then say "fast". After 3-5 fast steps, say "slow". Allow 3-5 slow steps before the subject stops walking.</i>
11. WALK WITH HEAD TURNS – HORIZONTAL (2) Normal: performs head turns with no change in gait speed and good balance. (1) Moderate: performs head turns with reduction in gait speed. (0) Severe: performs head turns with imbalance.			<i>"Begin walking at your normal speed, when I say "right", turn your head and look to the right. When I say "left" turn your head and look to the left. Try to keep yourself walking in a straight line."</i>	<i>Allow the subject to reach normal speed, and give the commands "right, left" every 3-5 steps. Score if you see a problem in either direction. If subject has severe cervical restrictions allow combined head and trunk movements.</i>
ITEM	ADMISSION (Within 7 days) OR THRESHOLD (Within 2 days of meeting criterion*)	DISCHARGE (Within 7 days)	PATIENT INSTRUCTIONS	THERAPIST INSTRUCTIONS
12. WALK WITH PIVOT TURNS (2) Normal: Turns with feet close, FAST (< 3 steps) with good balance. (1) Moderate: Turns with feet close SLOW (>4 steps) with good balance. (0) Severe: Cannot turn with feet close at any speed without imbalance.			<i>"Begin walking at your normal speed. When I tell you to 'turn and stop', turn as quickly as you can, face the opposite direction, and stop. After the turn, your feet should be close together."</i>	<i>Demonstrate a pivot turn. Once the subject is walking at normal speed, say "turn and stop." Count the number of steps from "turn" until the subject is stable. Imbalance may be indicated by wide stance, extra stepping or trunk motion.</i>
13. STEP OVER OBSTACLES (2) Normal: Able to step over box with minimal change of gait speed and with good balance. (1) Moderate: Steps over box but touches box OR displays cautious behavior by slowing gait. (0) Severe: cannot step over box OR steps around box.			<i>"Begin walking at your normal speed. When you come to the box, step over it, not around it and keep walking."</i>	<i>Place the box (9" or 23 cm height) 10 feet away from where the subject will begin walking. Two shoeboxes taped together works well to create this apparatus.</i>

<p>14. TIMED UP & GO WITH DUAL TASK Use the TUG time to determine the effects of dual tasking. The subject should walk a 3 meter distance.</p> <p>(2) Normal: No noticeable change in sitting, standing, or walking while backward counting when compared to TUG without Dual Task.</p> <p>(1) Moderate: Dual task affects either counting OR walking (>10%) when compared to the TUG without Dual Task. (this can be affected by errors or decrease in speed)</p> <p>(0) Severe: Stops counting while walking OR stops walking while counting.</p>	<p>TUG:</p> <p>_____ sec.</p>	<p>TUG:</p> <p>_____ sec.</p>	<p>TUG: "When I say 'Go', stand up from chair, walk at your normal speed across the tape on the floor, turn around, and come back to sit in the chair."</p> <p>Tug with Dual Task: "Count backwards by threes starting at _____. When I say 'Go', stand up from chair, walk at your normal speed across the tape on the floor, turn around, and come back to sit in the chair. Continue counting backwards the entire time."</p>	<p>TUG: Have the subject sitting with the subject's back against the chair. The subject will be timed from the moment you say "Go" until the subject returns to sitting. Stop timing when the subject's buttocks hit the chair bottom and the subject's back is against the chair. The chair should be firm with arms.</p> <p>TUG With Dual Task: While sitting determine how fast and accurately the subject can count backwards by threes starting from a number between 100-90. Then, ask the subject to count from a different number and after a few numbers say "Go". Time the subject from the moment you say "Go" until the subject returns to the sitting position. Score dual task as affecting counting or walking if speed slows (>10%) from TUG and or new signs of imbalance.</p>
	<p>SCORE:</p>	<p>SCORE:</p>		
<p>TOTAL SCORE:</p>	<p>/ 28</p>	<p>/ 28</p>		

Data Collection Details (for RHSCIR study use only)

<p>Collected by: (please print name)</p>		<p>Initial Here:</p>		<p>Date Abstraction Completed:</p>	<p>YYYY-MM-DD</p>
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