Participant 12 Week Data Screening

Evaluator: See STEADI handouts for instructions to perform tests. Record the participant's scores on this page.

1. Today's Date: __ __ / __ __ / __ __ __ __
m m d d y y y y

2. ID: Participant's first two letters first name, First two letters of last name, and last two numbers of your birth year:

____ ____ ____ ____ ____ ____
First1 First2 Last1 Last2 BirthYr3 BirthYr4

TIMED UP & GO (TUG)

Trial	Seconds
1 (Practice)	
2	
3	
	Average of trials two and three = _____ seconds (TUG score)

Walking Aid used? □ Yes □ No Type of aid: _____

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30 SECOND SIT TO STAND

_____ # of Stands (put "0" if they cannot perform 1 as instructed)