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| <input type="checkbox"/> ABMC | <input type="checkbox"/> ALMC | <input type="checkbox"/> AMCWC | <input type="checkbox"/> AWAMC |
| <input type="checkbox"/> AHCM-AS | <input type="checkbox"/> AMCK | <input type="checkbox"/> AMHB | <input type="checkbox"/> AUWAMG |
| <input type="checkbox"/> AHCM-SL | <input type="checkbox"/> AMCMC | <input type="checkbox"/> APH | <input type="checkbox"/> AMG (site) |
| <input type="checkbox"/> AHCM-SS | <input type="checkbox"/> AMCO | <input type="checkbox"/> ASMMC | |

THE LOWER EXTREMITY FUNCTIONAL SCALE

Date _____ Initial Interim Discharge

We are interested in knowing whether you are having any difficulty at all with the activities listed below **because of your lower limb** problem for which you are currently seeking attention. Please provide an answer for **each** activity.

Today, do you or would you have any difficulty at all with: (circle one number on each line)

Activites	Extreme Difficulty or Unable to Perform Activity	Quite a Bit of Difficulty	Moderate Difficulty	A Little Bit of Difficulty	No Difficulty
1 Any of your usual work, housework, or school activities.	0	1	2	3	4
2 Your usual hobbies, re creational or sporting activities.	0	1	2	3	4
3 Getting into or out of the bath.	0	1	2	3	4
4 Walking between rooms.	0	1	2	3	4
5 Putting on your shoes or socks.	0	1	2	3	4
6 Squatting.	0	1	2	3	4
7 Lifting an object, like a bag of groceries from the floor.	0	1	2	3	4
8 Performing light activities around your home.	0	1	2	3	4
9 Performing heavy activities around your home.	0	1	2	3	4
10 Getting into or out of a car.	0	1	2	3	4
11 Walking 2 blocks.	0	1	2	3	4
12 Walking a mile.	0	1	2	3	4
13 Going up or down 10 stairs (about 1 flight of stairs).	0	1	2	3	4
14 Standing for 1 hour.	0	1	2	3	4
15 Sitting for 1 hour.	0	1	2	3	4
16 Running on even ground.	0	1	2	3	4
17 Running on uneven ground.	0	1	2	3	4
18 Making sharp turns while running fast.	0	1	2	3	4
19 Hopping.	0	1	2	3	4
20 Rolling over in bed.	0	1	2	3	4
Column Totals					

Error (single measure): ±5 scale points
MDC: 9 scale points
MCID: 9 scale points

Score: _____/80

