## Interview \& informal observation

Here you can note any relevant data and information from the initial data and interview \& informal observation the way you like. See sections 1 \& 2 for the case-specific details.


|  | Tests \& measurements | Findings | Indications |
| :---: | :---: | :---: | :---: |
|  | BBS | Total score 47 / 56 | Supports P1 |
|  |  | Items most specific to P1: functional reach $3(20 \mathrm{~cm})$; look over shoulder 3 (weight not fully shifted to R; slipper reach $3 ; 360$ degree turn ( $\mathrm{R} 10.8 \mathrm{sec}, \mathrm{L} 9.7 \mathrm{sec}$ ) |  |
|  | ABC - scale | Total score 68.5 / 100 | Supports P1 |
|  |  | Items most specific to P 1 : picking up slipper from floor 40; reaching at eye level 40; standing on tiptoes+reaching up 10; standing on chair+reaching 10; sweeping floor 40 |  |
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|  | Tests \& measurements | Findings | Indications |
|  | Alignment | Equal weight distribution, trunk mid-line, normal base of support | Partly refutes H1 |
|  | Observational analysis: self-initiated sway forward, backward, side-to-side | Loses balance control in fast sway in different directions. Adding a double task (cognitive, motor) notably reduces balance control. | Supports H1, H3 |
|  | Nudge test | Able to maintain balance, uses ankle strategy in small pertubation and hip strategy in large pertubation. Ankle DF symmetrical in pertubation backward. | Partly refutes H1 |
|  | Modified CTSIB | Firm surface - EO 30 sec ; firm surface - EC 30 sec ; foam surface - EO 10 sec ; foam surface - EC 8 sec | Supports H2 |
|  | Isometric muscle force generation capacity - MRC-scale | R knee extension 4/5; R ankle DF 4/5; all others 5/5 | Partly supports H4 |
|  | Passive ROM - LE | Full L + R | Refutes H5 |
|  | MAS | L + R 0/4 | Refutes H5 |
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| Problem \#'s | Hypotheses \#'s | Strategy | Tactic <br> (description, intensity, duration \& frequency) | Implemeter | Progression \& Remarks |
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