ANPT core outcome measures

AD5TSTSGOAL

The patient will complete the 5-time sit-to-stand test in less than *** seconds, with a target of less than 12 seconds (based on normative data for adults aged 60-69) and without using arms for assistance for improved ***

Normative Data:

Age in years (n)	Mean ±SD
14-19 (25)	6.5 ± 1.2 sec
20-29 (36)	6.0 ± 1.4 sec
30-39 (22)	6.1 ± 1.4 sec
40-49 (15)	7.6 ± 1.8 sec
50-59 (20)	7.7 ± 2.6 sec
60-69 (25)	7.8 ± 2.4 sec
70-79 (24)	9.3 ± 2.1 sec
80-85 (14)	10.8 ± 2.6 sec
50-85 (83)	8.7 ± 2.6 sec

Parkinson Disease

-16 seconds discriminates fallers vs. non-fallers, with > 16 seconds indicating risk for falls

Balance and/or vestibular disorder (mean length of balance or dizziness symptoms=14.3 months, range: 4-30 months)

  Cutoff score: 13 seconds indicates balance dysfunction

 < 60 years old: 10 seconds; >60 years old: 14.2 seconds

Stroke (chronic)

-Cutoff score: >12 seconds discriminates healthy adults from individuals with stroke

Community dwelling older adults

  -≥12 seconds identifies the need to further assess for falls8

->15 seconds= risk of fall

AD6MWTGOAL

The patient will improve their 6-minute walk test distance to *** meters, achieving a goal consistent with normative data for *** within demonstrating improved cardiovascular endurance and lower extremity strength.

Normative Data:

Mean Distance in Meters by Age & Gender		
Age	Male	Female
60-69 yrs	572m	538m
70-79 yrs	527m	471m
80-89 yrs	417m	392m

• Multiple Sclerosis (mean EDSS= 3.5)

MDC: 88m or 20% change

• Parkinson Disease (Hoehn & Yahr 1-4, median 2):

MDC: 82 m

• Stroke:

MDC (chronic, >12 months post-stroke, BBS= 46-55): 34.4m

MDC (chronic, 6-48 months post-stroke, ability to ambulate 300m): 36.6 m

MDC† (subacute, 30-150 days poststroke): 61.0 m

MCID (chronic, >6 months post-stroke): 34.4 m

MCID (2-6 months post-stroke, ability to walk 3 m with < max assist):

 when initial gait speed <0.40 m/s = 44 m17

when initial gait speed ≥0.40 m/s = 71 m17

https://www.neuropt.org/docs/default-source/cpgs/core-outcome-measures/6mwt-pocket-guide-proof9.pdf?sfvrsn=9ee25043_0

ADBBSGOAL

The patient will improve balance and functional mobility, as demonstrated by an increase in the Berg Balance Scale score by *** with a target score of ***. This will be achieved through focused interventions, including [list specific interventions such as strengthening, proprioceptive training, or gait training], and will aim to reduce fall risk, enhance stability during functional tasks, and improve confidence in activities of daily living (ADLs) and ***

Non-Specific/Older Adults

Cutoff Score: ≤40 almost 100% fall risk

Cutoff Score: ≤50 fall risk

• Stroke

MDC (acute): 6-7 points

MDC (chronic): 4.66 points (superscript 2) to 6.7 points

• Parkinson's Disease (Hoehn & Yahr stages 1-4)

MDC: 5 points3

• Huntington's Disease

MDC (premanifest HD): 1 point

MDC (early-stage HD): 4 points

MDC (middle and late-stage): 5 points

https://neuropt-website-documents.s3.amazonaws.com/docs/default-source/cpgs/core-outcome-measures/berg-balance-scale-pocket-guide-proof-8.pdf?sfvrsn=8fe25043_0

ADFGAGOAL

The patient will improve gait stability, as evidenced by an increase in the Functional Gait Assessment (FGA) score by ***, with the goal of achieving a score of ***. This improvement will be supported through targeted interventions, including gait training, balance exercises, strengthening, and neuromuscular re-education, to enhance functional mobility, reduce fall risk, and improve overall safety during walking tasks in various environments.

• Non-Specific Older Adults

Cutoff Score: ≤22/30 = risk of falls

• Parkinson's Disease

Cutoff score <15/30= fall risk (Hoehn & Yahr 1-4)

Cutoff score <18/30= fall risk (Inpatients; Hoehn & Yahr 1-4)

• Stroke (acute, subacute, and chronic)

MDC: 4.2 points • Vestibular (acute)

MDC: 6 points • Community Dwelling Older Adults

MCID: 4 points • Parkinson's Disease (Hoehn & Yahr stages 1-3)

MDC: 4.3 points

https://neuropt-website-documents.s3.amazonaws.com/docs/default-source/cpgs/core-outcome-measures/function-gait-assessment-pocket-guide-proof9-(2).pdf?sfvrsn=b4f35043_0

AD10MWTGOAL

Patient will improve walking speed by increasing the time taken to complete the 10-meter walk test to *** with a focus on increasing efficiency and gait stability for ***

Decade	Men (m/s)	Women (m/s)
20s	1.358	1.341

30s	1.433	1.337
40s	1.434	1.390
50s	1.433	1.313
60s	1.339	1.241
70s	1.262	1.132
80s/90s	0.968	0.943

Cutoff Scores (Stroke)

<0.4 m/s household ambulators

0.4-0.8 m/s limited community ambulators

>0.8 m/s community ambulators

• Cutoff Scores (Healthy older adults)

    < 0.7 m/s is indicative of increased risk of adverse events

(fall, hospitalization, need for caregiver, fracture, etc

Parkinson's Disease (Hoehn and Yahr 1-4, median score 2)

    MDC (comfortable): 0.18 m/s

    MDC (fast): 0.25 m/s

• Spinal Cord Injury (incomplete SCI < 12 months)

    MDC: 0.13 m/s

•Stroke

    MDC (acute) 0.11 m/s

    MDC (chronic > 6months, comfortable): 0.18 m/s

    MDC (chronic > 6months, fast): 0.13 m/s

    MCID (subacute): 0.16 m/s

• Huntington's Disease

    MDC (pre-manifest HD, comfortable): 0.23 m/s

    MDC (manifest HD, comfortable): 0.34 m/s

    MDC (early-stage HD, comfortable): 0.20 m/s

MDC (middle-stage HD, comfortable): 0.46 m/s

MDC (late-stage, comfortable): 0.29 m/s

• Multiple Sclerosis

Smallest % difference change (EDSS 3.0-6.0, comfortable): -23%/+30%

MDC (EDSS 0-6.5, comfortable and fast): 0.26 m/s

https://neuropt-website-documents.s3.amazonaws.com/docs/default-source/cpgs/core-o
utcome-measures/10mwt-pocket-guide-rev-0520.pdf?sfvrsn=90145143_0

Increase the Activity Balance Confidence (ABC) score by ***% for improving balance confidence with***

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•Parkinson's Disease

Cut-off score of < 69% is predictive of recurrent falls.

•Stroke (chronic, > 6 months post)

Cut-off score of 81.1% indicates relative certainty that the patient does not have a

history of falls.

•Older Adults

Scores < 67% indicate risk for falling; accurately classify people who fall 84% of the time

•Older Adults

>80% = high level of physical functioning

50-80% = moderate level of physical function

 < 50% = low level of physical functioning

•Parkinson's Disease

MDC (Hoehn & Yahr 1-4): 13%6

MDC: 30.5%

•Stroke (acute to chronic)

MDC: 14%

https://neuropt-website-documents.s3.amazonaws.com/docs/default-source/cpgs/core-outcome-measures/activities-specific-balance-confidence-scale-proof8-(2)11db36a5390366a68a96ff00001fc240.pdf?sfvrsn=d7d85043_0