**Performance-Oriented Assessment of Balance**

**Patient's Name:** ____________________________  **Date:** ____________________________

**Instructions:** The patient begins the assessment seated in a hard, straight-backed, armless chair. Ask the patient to perform each of the maneuvers described in the chart. Record the observations made according to the possible responses. The patient’s response to each maneuver will align most closely with one of the criteria in the tool. Accurate assessment is dependent upon close observation of the patient during each maneuver.

<table>
<thead>
<tr>
<th>Maneuver</th>
<th>Patient Response to Maneuver</th>
</tr>
</thead>
</table>
| Sitting in chair                                                         | **Normal = 2** Steady, stable  
Holds onto chair to keep upright  
Leaks, slides down in chair                                      |
| Rising from chair                                                       | **Normal = 2** Able to rise in a single movement without using arms  
**Adaptive = 1** Uses arms to hold onto chair or walking aid to pull or push up and/or moves forward in chair before attempting to rise  
**Abnormal = 0** Multiple attempts required or unable without personal assistance |
| Immediate standing balance (first 3 to 5 seconds after standing)         | **Normal = 2** Steady without holding onto walking aid or other object for support  
**Adaptive = 1** Steady, but uses walking aid or other object for support  
**Abnormal = 0** Any sign of unsteadiness (e.g., grabbing objects for support, staggering, moving feet, more than minimal trunk sway) |
| Standing balance                                                        | **Normal = 2** Steady, able to stand with feet together without holding object for support  
**Adaptive = 1** Steady, but cannot put feet together  
**Abnormal = 0** Any sign of unsteadiness regardless of stance or holds onto an object |
| Balance with eyes closed (with feet as close together as possible)       | **Normal = 2** Steady without holding onto any object with feet together  
**Adaptive = 1** Steady with feet apart  
**Abnormal = 0** Any sign of unsteadiness or holds onto an object |
| Turning balance (360°)                                                  | **Normal = 2** No grabbing or staggering; no need to hold onto any objects; steps are continuous (turn is a flowing movement)  
**Adaptive = 1** Steps are discontinuous (puts one foot completely on floor before raising other foot)  
**Abnormal = 0** Any sign of unsteadiness or holds onto an object |
| Nudge on sternum (patient should stand with feet as close together as possible; examiner pushes with light, even pressure over sternum 3 times; reflects ability to withstand displacement) | **Normal = 2** Steady, able to withstand pressure  
**Adaptive = 1** Needs to move feet, but able to maintain balance  
**Abnormal = 0** Begins to fall, or examiner has to help maintain balance |
| Neck turning (patient is asked to turn head side to side and then to look up while standing with feet as close together as possible) | **Normal = 2** Able to turn head at least halfway side to side and able to bend head back to look at ceiling; no staggering, grabbing, or symptoms of lightheadedness, unsteadiness, or pain  
**Adaptive = 1** Decreased ability to turn side to side and to extend neck backward, but no staggering, grabbing, or symptoms of lightheadedness, unsteadiness, or pain  
**Abnormal = 0** Any signs of unsteadiness or symptoms when turning head or extending neck backward |
<table>
<thead>
<tr>
<th>Maneuver</th>
<th>Normal = 2</th>
<th>Adaptive = 1</th>
<th>Abnormal = 0</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>One leg standing balance</td>
<td>Able to stand on one leg for 5 seconds without holding object for support</td>
<td></td>
<td>Unable</td>
<td></td>
</tr>
<tr>
<td>Back extension (ask patient to lean back as far as possible without</td>
<td>Good extension without holding object or staggering</td>
<td>Tries to extend, but range of motion is decreased (compared with other</td>
<td>Will not attempt, no extension ability, or staggers</td>
<td></td>
</tr>
<tr>
<td>holding onto object if possible)</td>
<td></td>
<td>other patients of the same age) or needs to hold object to attempt</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reaching up (have patient attempt to remove an object from a shelf</td>
<td>Able to take down object without needing to hold onto other object for</td>
<td>Able to get object but needs to steady self by holding onto something</td>
<td>Unable or unsteady</td>
<td></td>
</tr>
<tr>
<td>high enough to necessitate stretching or standing on toes)</td>
<td>support and without becoming unsteady</td>
<td>for support</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bending down (ask patient to pick up small objects, such as a pen,</td>
<td>Able to bend down and pick up the object; able to get up easily in</td>
<td>Able to get object and get upright in single attempt but needs to pull</td>
<td>Unable to bend down, unable to get upright after bending down, or takes</td>
<td></td>
</tr>
<tr>
<td>from the floor)</td>
<td>single attempt without needing to pull self up with arms</td>
<td>self up with arms or hold onto something for support</td>
<td>multiple attempts to upright self</td>
<td></td>
</tr>
<tr>
<td>Sitting down</td>
<td>Able to sit down in one smooth movement</td>
<td>Needs to use arms to guide self into chair or not a smooth movement</td>
<td>Falls into chair or misjudges distances and lands off center</td>
<td></td>
</tr>
</tbody>
</table>

**TOTAL PATIENT SCORE**

*A higher score reflects better balance ability*

(Tinetti, 1986)

**Sources:**