Acrostic <u>acrostic</u>

Participant ID <u>pid</u>   Examiner <u>compby</u>   V.C. <u>vc</u>

Date of Visit <u>vis_mth</u>   / <u>vis_day</u>   / <u>vis_yr</u>

400 Meter walk

<u>Stopping Criteria for 400 Meter Walk:</u> If the participant reports chest pain, tightness or pressure, significant shortness of breath or difficulty breathing, or feeling faint, lightheaded or dizzy, <u>stop the test</u>. Record the reason for stopping.

Observations of 400 Meter Walk

Accompany the subject to the starting line of the 400 meter walk with script and stop watch. Describe the 400 meter walk:

Script:

"Now I would like to observe how you normally walk. You will be walking 10 complete laps around the course, which corresponds to about ¼ mile. I would like you to walk at your usual pace and without overexerting yourself. During this test, I will ask you to rate how hard you feel you are working. When I ask you to rate how hard you are working during the walk, I want you to think about the total feeling of exertion in your overall body, including your breathing and muscles. At the end of lap 4, while you continue walking, I will ask you how hard you are working. After you have completed all 10 laps, I will tell you to stop, and measure your heart rate. If you develop chest pain or significant shortness of breath, or are too uncomfortable to continue, please stop walking and tell me. If you need to, you may stand in place and rest for a few moments."

If subject uses cane or other assistive device: **"I would like you to attempt this test without your cane (or other walking device)."**

1. Do you feel it would be safe to try to walk up and down this hallway 10 times?

<u>safe_w400</u>
-9
1 Yes (demonstrate)
0 No (Go to 3)
-8 Don't Know (Go to 2)
-6 Not on form

2. Would you be willing to try it and see how you feel?

<u>willing_w400</u>
-9
1 Yes (demonstrate)
0 No (Go to 3)
-6 Not on form

3. Did participant bring a cane (walking device) to the clinic?
  (Interviewer: If this is screening visit 1, participant is ineligible)

<u>walkdev_w400</u>
-9
1 Yes (demonstrate)
0 No (Stop)
-6 Not on form

4. Do you feel it would be safe if you could use your cane (or other device)?

<u>safewkdv_w400</u>
-9
1 Yes (demonstrate)
0 No (stop)
-6 Not on form

Script: " I will demonstrate 1 lap." *After completing demonstration, ask :* **"Do you have any questions?"**
When subject indicates they feel ready to begin, the test may proceed:
Script: ?I will walk behind you, When I say ?GO?, start *<u>walking at a comfortable pace you can maintain</u>*. Ready, Go.?

Start the stop watch when the subject takes their first step. If needed, for safety purposes, examiner should follow subject at a reasonable distance during test. Examiner should be close enough to subject to be able to provide help should subject falter during test, but not so close as to dictate the pace of the test. The examiner should be behind and to the side of the subject, just outside their peripheral vision. For every lap, the examiner should offer standard encouragement, and call out the number of laps completed and number remaining.

Script: "You're doing a good job. You have completed __ laps and have __ to go."

If the participant feels they need to stop and rest, they may <u>stand in one place and rest</u>. Participant should not lean on wall, table or elsewhere. After 30 seconds, ask them if they can continue walking. If they can, continue the walk and note the rest on the form. (go on to #6)

If they need to rest longer, have them continue to stand. <u>After another 30 seconds, ask them if they can continue walking</u>. If they can, continue the walk and note the rest stop on the form. (go on to #6)

If they cannot continue after a 60 second rest or if they need to sit down, stop the test. (go on to #7)

There is no limit to the number of rest stops as long as they can complete the walk without sitting. (record all stops on #6)

a. Did the participant use an assistive walking device during the test? device_w400

-9
 1 Yes
 0 No
-6 Not on form

5. Mark an X in the corresponding box when each lap is completed

Lap 1	Lap 2	Lap 3	Lap 4	Please tell me how hard you feel you are working right now. Is it "light", "somewhat hard", "hard" or "very hard"?	a. howhard_w400 -9 1 Light 2 Somewhat hard 3 Hard 4 Very Hard -6 Not on form
lap1_w400 ☐	lap2_w400 ☐	lap3_w400 ☐	lap4_w400 ☐		*(If the participant reports "hard" or "very hard", read script below.)*

Script: I would like to remind you to walk at your usual pace without overexerting yourself. If you develop chest pain or significant shortness of breath, or are too uncomfortable to continue, please stop walking and tell me. If you need to, you may stand in place and rest for a few moments.

Lap 5	Lap 6	Lap 7	Lap 8	Lap 9	Lap 10
lap5_w400 ☐	lap6_w400 ☐	lap7_w400 ☐	lap8_w400 ☐	lap9_w400 ☐	lap10_w400 ☐

6. For each rest stop, Mark an X corresponding to the length of time of the rest (standing rests only):

Rest stop number 1:   reststp1_w400
-9
 1 < 30 sec
 2 31-60 sec
 3 > 60 sec (test stopped)
-6 Not on form

Rest stop number 2:   reststp2_w400
-9
 1 < 30 sec
 2 31-60 sec
 3 > 60 sec (test stopped)
-6 Not on form

Rest stop number 3:   reststp3_w400
-9
 1 < 30 sec
 2 31-60 sec
 3 > 60 sec (test stopped)
-6 Not on form

Rest stop number 4:   reststp4_w400
-9
 1 < 30 sec
 2 31-60 sec
 3 > 60 sec (test stopped)
-6 Not on form

Rest stop number 5:   reststp5_w400
-9
 1 < 30 sec
 2 31-60 sec
 3 > 60 sec (test stopped)
-6 Not on form

Rest stop number 6:   reststp6_w400
-9
 1 < 30 sec
 2 31-60 sec
 3 > 60 sec (test stopped)
-6 Not on form

Rest stop number 7:   reststp7_w400
-9
 1 < 30 sec
 2 31-60 sec
 3 > 60 sec (test stopped)
-6 Not on form

Rest stop number 8:   reststp8_w400
-9
 1 < 30 sec
 2 31-60 sec
 3 > 60 sec (test stopped)
-6 Not on form

Rest stop number 9:

reststp9_w400
-9
1 < 30 sec
2 31-60 sec
3 > 60 sec (test stopped)
-6 Not on form

Rest stop number 10:

reststp10_w400
-9
1 < 30 sec
2 31-60 sec
3 > 60 sec (test stopped)
-6 Not on form

Total Number of stops: tot_stop_w400

7. If the test is terminated <u>prior to the subject completing 400 meters</u>, the point at which they stopped should be marked, and the subject accompanied to the nearest chair. After the subject is comfortably seated, their accomplished distance should be measured.

Complete laps will be counted as 20 meters each and the remaining incomplete lap should be measured with the Redi-Measure. Record the total distance and time at termination of test.

Did the participant complete the 400 meter walk?
(Record time that first foot crosses the finish line.)

walk_comp_w400
-9
1 Yes (Go to Question #8)
0 No (specify)
-6 Not on form

If No, Number of meters completed: m_cmp_w400   M

8. TIME to walk 400 meters or to stopping the test: walk_min_w400   Minutes walk_sec_w400 Seconds
(Interviewer Note: Exclude if > 15 minutes and 0 seconds)

9. Sitting Radial Pulse: beats per 30 seconds X2 = end_hr_w400   bpm

10. If test stopped early, ask: **"Why did you feel you couldn't continue?"**

Shortness of breath	stp_brth_w400 ☐	Feeling Faint or Dizzy	stp_fnt_w400 ☐
Chest Pain	stp_chst_w400 ☐	Fatigue	stp_fat_w400 ☐
Leg Pain	stp_leg_w400 ☐	Other	stp_oth_w400 ☐

(specify) stp_otsp_w400

11. At end of walk ask, **"Is there anything bothering you?"**

end_both_w400
-9
1 Yes (specify)
0 No (End)
-6 Not on form

If Yes, please specify what: end_bosp_w400

12. Observed Symptoms at end of walk: (check all that apply)

Shortness of breath	obs_brth_w400 ☐	Unsteadiness	obs_unst_w400 ☐	Other	obs_oth_w400 ☐
Wheezing / dyspnea	obs_whz_w400 ☐	Sweating	obs_swt_w400 ☐	No symptoms observed	obs_no_w400 ☐
Signs of discomfort	obs_disc_w400 ☐	Specify Other	obs_otsp_w400		

Source Form Language: lang
-9 -
1 English
2 Spanish

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