## **Measurement Tools and Instructions**

## **Lower Extremity Functional Scale**

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 with:  Circle one number on each line)  Activities	Exteme difficulty or unable to perform activity	<b>Quite a bit</b> of difficulty	<b>Moderate</b> difficulty	<b>A little bit</b> of difficulty	No difficulty
A. Any of your usual work, housework, or school activities.	0	1	2	3	4
B. Your usual hobbies, recreational or sporting activities.	0	1	2	3	4
c. Getting into or out of the bath.	0	1	2	3	4
D. Walking between rooms.	0	1	2	3	4
	0	1	2		4
E. Putting on your shoes or socks.				3	
F. Squatting.	0	1	2	3	4
<b>G.</b> Lifting an object, like a bag of groceries from the floor.	0	1	2	3	4
H. Performing light activities around your home.	0	1	2	3	4
I. Performing heavy activities around your home.	0	1	2	3	4
J. Getting into or out of a car.	0	1	2	3	4
K. Walking 2 blocks.	0	1	2	3	4
L. Walking a mile.	0	1	2	3	4
M. Going up or down 10 stairs (about 1 flight of stairs).	0	1	2	3	4
N. Standing for 1 hour.	0	1	2	3	4
o. Sitting for 1 hour.	0	1	2	3	4
P. Running on even ground.	0	1	2	3	4
Q. Running on uneven ground.	0	1	2	3	4
R. Making sharp turns while running fast.	0	1	2	3	4
s. Hopping.	0	1	2	3	4
T. Rolling over in bed.	0	1	2	3	4
Column Totals:					
Minimum level of detectable change (90% Confidence): <b>9 points</b>			SCO	ORE	/ 8

Source: Binkley et al (1999): The Lower Extremity Functional Scale (LEFS): Scale development, measurement properties, and clinical application. Physical Therapy. 79: 371-383