# **BESTest** Balance Evaluation – Systems Test Fay Horak PhD Copyright 2008

TEST NUM	BER/SUBJECT CODE		DATE		
EXAMINER	NAME				
1. Subject	Instructions for BESTest should be tested with flat he ct must use an assistive device		shoes and socks off. e that item one category lower		
<ul> <li>Mea</li> <li>App</li> <li>10 c</li> <li>Sta</li> <li>2 st</li> <li>2.5</li> <li>Firr</li> </ul>	p watch asuring tape mounted on wall broximately 60 cm x 60 cm (2 degree incline ramp (at least 2 ir step, 15 cm (6 inches) in he acked shoe boxes for obstact Kg (5-lb) free weight for rapid	X 2 ft) block of 4-ind 2 x 2 ft) to stand on eight for alternate sta le during gait d arm raise rs in front marked w	ch, medium-density, Tempur® foam air tap vith tape for Get Up and Go test		
SUMMARY	OF PERFORMANCE: CALC	CULATE PERCENT	SCORE		
Section I: Section II: Section III:	/15 x 100 = /21 x 100 = /18 x 100 =	St	omechanical Constraints ability Limits/Verticality ansitions/Anticipatory		
Section IV	/18 x 100 =	Re	eactive		
Section V:	/15 x 100 =	Se	ensory Orientation		
Section VI:	/21 x 100 =	St	ability in Gait		

TOTAL: \_\_\_\_\_/108 points = \_\_\_\_ Percent Total Score

## BESTest- Inter-rater Reliability Balance Evaluation – Systems Test

Subjects should be tested with flat heeled shoes or shoes and socks off. If subject must use an assistive device for an item, score that item one category lower. If subject requires physical assistance to perform an item score the lowest category (0) for that item.

	0.0 0.0	west sategory (e) for that item.						
1. Base	OF SUPPO (3) Norma	L CONSTRAINTS  ORT  al: Both feet have normal base of support  oot has deformities and/or pain	t with no d			/15 POINTS		
	. ,	eet has deformities OR pain eet have deformities AND pain						
	(2) Abnor (1) Abnor	NT al AP and ML CoM alignment and normal mal AP <u>OR</u> ML CoM alignment <u>OR</u> abno mal AP OR ML CoM alignment <u>AND</u> abn mal AP <u>AND</u> ML CoM alignment	rmal segn	nental po	ostural alignmen			
	3. ANKLE STRENGTH & RANGE  (3) Normal: Able to stand on toes with maximal height and to stand on heels with front of feet up  (2) Impairment in either foot of either ankle flexors or extensors (i.e. less than maximum height)  (1) Impairment in two ankle groups (eg; bilateral flexors or both ankle flexors and extensors in 1 foot)  (0) Both flexors and extensors in both left and right ankles impaired (i.e. less than maximum height)							
<ul> <li>4. HIP/TRUNK LATERAL STRENGTH (3) Normal: Abducts both hips to lift the foot off the floor for 10 s while keeping trunk vertical (2) Mild: Abducts both hips to lift the foot off the floor for 10 s but without keeping trunk vertical (1) Moderate: Abducts only one hip off the floor for 10 s with vertical trunk (0) Severe: Cannot abduct either hip to lift a foot off the floor for 10 s with trunk vertical or without vertical</li> </ul>								
		AND STANDUP			secs			
<ul> <li>(3) Normal: Independently sits on the floor and stands up</li> <li>(2) Mild: Uses a chair to sit on floor <u>OR</u> to stand up</li> <li>(1) Moderate: Uses a chair to sit on floor <u>AND</u> to stand up</li> <li>(0) Severe: Cannot sit on floor or stand up, even with a chair, or refuses</li> </ul>								
II. STABILITY LIMITS SECTION II:/21 POINTS								
6. SITTI	NG VERTIO	CALITY AND LATERAL LEAN  Lean			Verticality			
<u>Left</u>			<u>Left</u>	Right				
(3)	(3)	Maximum lean, subject moves upper shoulders beyond body midline, very stable	(3)	(3)	Realigns to very SMALL of OVERSHOOT	r no		
(2)	(2)	Moderate lean, subject's upper shoulder approaches body midline	(2)	(2)	Significantly C shoots but ever	ver- or under-		

(1)

(0)

(1)

(0)

realigns to vertical

Failure to realign to vertical

Falls with the eyes closed

or some instability

instability

Very little lean, or significant

No lean or falls (exceeds limits)

(1)

(0)

(1)

(0)

(3) (2)	NCTIONAL REACH FORWARD Maximum to limits: >32 cm Moderate: 16.5 cm - 32 cm Poor: < 16.5 cm (6.5 in) No measurable lean – or m	(12.5 in ) n (6.5 – 12.5 in)	ched:	_cm OR_	ii	nches		
<u>Left</u> (3) (2)	NCTIONAL REACH LATERAL  Right (3) Maximum to limit: > (2) Moderate: 10-25.5 (1) Poor: < 10 cm (4 in (0) No measurable lear	25.5 cm (10 in) cm (4-10 in)		_ cm (	_in) <u>Righ</u> t _		cm (	in)
9. SIT (3) N (2) C (1) C	RANSITIONS- ANTICIPATORY P TO STAND ormal: Comes to stand without omes to stand on the first at omes to stand after several oack of leg or chair equires moderate or maxima	out the use of han tempt <u>with</u> the use <u>attempts</u> or requir	ds and stab e of hands	ilizes indep	endently			s touch of
(3) N (2) I (1) I	ISE TO TOES Iormal: Stable for 3 sec with Heels up, but not full range ( -OR- slight instability & hold: Holds for less than 3 sec Jnable	smaller than whe	n holding ha	nds so no	balance red	quiremo	ent)	
Left (3) N (2) T (1) S	TAND ON ONE LEG  Time in Sec:  lormal: Stable for > 20 s  runk motion, OR 10-20 s  stands 2-10 s  Inable	(3) (2) (1)	n <u>t</u> Normal: Sta Trunk motio Stands 2-10 Unable	able for > 2 on, OR 10-				
(3) I (2) ( (1) (	LTERNATE STAIR TOUCHING Normal: Stands independent Completes 8 steps (10-20 se excessive trunk motion, hesi Completes < 8 steps – witho Completes < 8 steps, even well	tly and safely and econds) AND/OR tation or arhythmi <u>ut</u> minimal assista	completes the show instabulated cal ance (i.e. as	3 steps in < ility such a	10 second s inconsiste	ls ent foot	t placem	ent,
(3) N (2) V (1) S	TANDING ARM RAISE lormal: Remains stable l'isible sway iteps to regain equilibrium/ui Inable, or needs assistance	•	ckly w/o los	ing baland	ce			

### IV. REACTIVE POSTURAL RESPONSE SECTION IV: \_\_\_\_\_\_/18 POINTS

- 14. IN PLACE RESPONSE- FORWARD
- (3) Recovers stability with ankles, no added arms or hips motion
- (2) Recovers stability with arm or hip motion
- (1) Takes a step to recover stability
- (0) Would fall if not caught OR requires assist OR will not attempt
- 15. IN PLACE RESPONSE- BACKWARD
- (3) Recovers stability at ankles, no added arm / hip motion
- (2) Recovers stability with some arm or hip motion
- (1) Takes a step to recover stability
- (0) Would fall if not caught -OR- requires assistance -OR- will not attempt
- 16. COMPENSATORY STEPPING CORRECTION- FORWARD
- (3) Recovers independently a single, large step (second realignment step is allowed)
- (2) More than one step used to recover equilibrium, but recovers stability independently OR 1 step with imbalance
- (1) Takes multiple steps to recover equilibrium, or needs minimum assistance to prevent a fall
- (0) No step, OR would fall if not caught, OR falls spontaneously
- 17. COMPENSATORY STEPPING CORRECTION- BACKWARD
- (3) Recovers independently a single, large step
- (2) More than one step used, but stable and recovers independently OR 1 step with imbalance
- (1) Takes several steps to recover equilibrium, or needs minimum assistance
- (0) No step, OR would fall if not caught, OR falls spontaneously
- 18. COMPENSATORY STEPPING CORRECTION- LATERAL Left
- (3) Recovers independently with 1 step of normal length/width (crossover or lateral OK)
- (2) Several steps used, but recovers independently
- (1) Steps, but needs to be assisted to prevent a fall
- (0) Falls, or cannot step

#### Right

- (3) Recovers independently with 1 step of normal length/width (crossover or lateral OK)
- (2) Several steps used, but recovers independently
- (1) Steps, but needs to be assisted to prevent a fall

**SECTION V: \_\_\_\_\_/15 POINTS** 

(0) Falls, or cannot step

#### V. SENSORY ORIENTATION

19. SENSORY INTEGRATION FOR BALANCE (MODIFIED CTSIB)

A -EYES OPEN, FIRM	B -EYES CLOSED, FIRM	C -EYES OPEN, FOAM	D -EYES CLOSED, FOAM	
SURFACE	SURFACE	SURFACE	SURFACE	
Trial 1sec	Trial 1sec	Trial 1sec	Trial 1sec	
Trial 2sec	Trial 2sec	Trial 2sec	Trial 2sec	
(3) 30s stable	(3) 30s stable	(3) 30s stable	(3) 30s stable	
(2) 30s unstable	(2) 30s unstable	(2) 30s unstable	(2) 30s unstable	
(1) < 30s	(1) < 30s	(1) < 30s	(1) < 30s	
(0) Unable	(0) Unable	(0) Unable	(0) Unable	

#### 20. INCLINE- EYES CLOSED

#### Toes Up

- (3) Stands independently, steady without excessive sway, holds 30 sec, and aligns with gravity
- (2) Stands independently 30 SEC with greater sway than in item 19B -OR- aligns with surface
- (1) Requires touch assist -OR- stands without assist for 10-20 sec
- (0) Unable to stand >10 sec -OR- will not attempt independent stance

	STABILITY IN GAIT  GAIT – LEVEL SURFACE  (3) Normal: walks 20 ft., good speed (≤ 5.5 sec	c), <u>no evidence of im</u>		
	<ul> <li>(2) Mild: 20 ft., slower speed (&gt;5.5 sec), no evidence of imbaland – at any preferred speed.</li> <li>(0) Severe: cannot walk 20 ft. without assistant</li> </ul>	ice (wide-base, later	al trunk motion,	
22.	CHANGE IN GAIT SPEED  (3) Normal: Significantly changes walking speed (2) Mild: Unable to change walking speed without (1) Moderate: Changes walking speed but with states (0) Severe: Unable to achieve significant change	ut imbalance signs of imbalance,	s of imbalance	
23.	<ul> <li>WALK WITH HEAD TURNS – HORIZONTAL</li> <li>(3) Normal: performs head turns with no change</li> <li>(2) Mild: performs head turns smoothly with red</li> <li>(1) Moderate: performs head turns with imbalar</li> <li>(0) Severe: performs head turns with reduced s available range while walking.</li> </ul>	uction in gait speed	,	not move head within
24.	WALK WITH PIVOT TURNS			
	(3) Normal: Turns with feet close, <u>FAST</u> (≤ 3 ste (2) Mild: Turns with feet close SLOW (≥4 steps) (1) Moderate: Turns with feet close at any speed (0) Severe: Cannot turn with feet close at any speed (1)	with good balance d with mild signs of <u>i</u>	<u>mbalance</u>	
25.	STEP OVER OBSTACLES		Time	sec
	(3) Normal: able to step over 2 stacked shoe boto (2) Mild: steps over 2 stacked shoe boxes but s (1) Moderate: steps over shoe boxes with imbal (0) Severe: cannot step over shoe boxes AND sassistance.	lows down, with goo lance or touches bo	od balance x.	-
26.	TIMED "GET UP & GO"  (3) Normal: Fast (<11 sec) with good balance (2) Mild: Slow (>11 sec with good balance) (1) Moderate: Fast (<11 sec) with imbalance. (0) Severe: Slow (>11 sec) AND imbalance.	Get Up & Go: Time		_sec
27.	Timed "Get Up & Go" With Dual Task (3) Normal: No noticeable change between sitting and no change in gait speed. (2) Mild: Noticeable slowing, hesitation or errors (1) Moderate: Affects on BOTH the cognitive task (0) Severe: Can't count backward while walking of	in counting backwar AND slow walking	rate or accuracy ds OR slow walk (>10%) in dual ta	y of backwards counting king (10%) in dual task