Patient Name:			-	Da	ate:			_
The A	Activities-spe	cific Balanc	e Confi	dence	(ABC)	Scale*		
Instructions to Participation doing the activity with percentage points on the and imagine how confident to do the activity or holes.	hout losing your e scale from 0% lent you would b	balance or be to 100% If yo be if you had to	coming u u do not o o do the a	nsteady currently activity. I	from ch do the f you no	oosing of activity is commally in	one of the in question, tr use a walking a	У
0% 10 No Confidence	20 30	40 50	60	70	80	90 Comp	100% letely Confide	ent
How confident are you that you will <u>not</u> lose your balance or become unsteady when you								
 walk around the house?% walk up or down stairs?% bend over and pick up a slipper from the front of a closet floor?% reach for a small can off a shelf at eye level?% stand on your tip toes and reach for something above your head?% stand on a chair and reach for something?% sweep the floor?% walk outside the house to a car parked in the driveway?% get into or out of a car?% walk across a parking lot to the mail?% walk up or down a ramp?% walk in a crowded mall where people rapidly walk past you?% are bumped into by people as you walk through the mail?% step onto or off of an escalator while you are holding onto a railing?% step onto or off an escalator while holding onto parcels such that you cannot hold onto the railing?								
Scoring:Total ABC Scor	_/15=	% of se	f confide	nce				
MEDICARE PATIENTS 100%% Functi		pairment						
Patient Signature:					Date: _			