

LEG STRENGTH (ISOMETRIC CHAIR)

- 1 Have you ever had knee surgery on either leg where all or part of the joint was replaced?
 Yes No Don't Know Refused **surgery**

Which leg?

whichleg

Right leg

Left leg

Both legs

Do NOT test right leg

Do NOT test left leg.

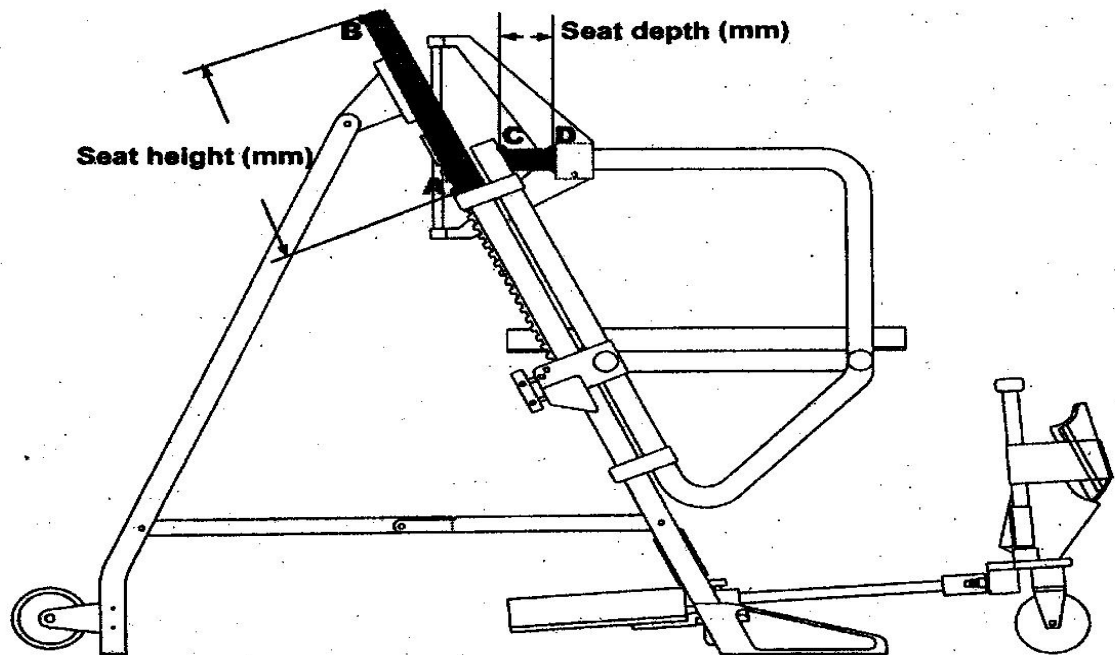
Do NOT test either leg. Go to Question #9.

- 2 What is the seat height? **height**
(Examiner Note: Record the seat height by measuring the distance between point "A" and "B" as noted below. Use a ruler marked in millimeters.)

mm

- 3 What is the seat depth? **depth**
(Examiner Note: Record the seat depth by measuring the distance between point "C" and "D" as noted below. Use a ruler marked in millimeters. Be sure that the depth is exactly the same measurement on both sides of the chair.)

mm



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4 What is the length of the lower leg to be tested? . meters **length**

5 Which leg was tested? **testleg**

Right leg

Left leg

Test not performed

Go to Question #9.

Trial	Maximum Torque (Nm)	Max Rate Torque (Nm/sec)	Reaction Time (msec)	Time to 50% MVTD (msec)	Did participant have knee pain?
1.	maxtorq1	maxrate1	reaction1	mvtd1	<input type="radio"/> Yes <input type="radio"/> No ↓ Pain1 Test other leg. Go to Question #6
2.	maxtorq2	maxrate2	reaction2	mvtd2	<input type="radio"/> Yes <input type="radio"/> No ↓ Pain2 Test other leg. Go to Question #6
3.	maxtorq3	maxrate3	reaction3	mvtd3	Test Complete. Go to Question #8.

6 What is the length of the lower leg? **length2**

(Examiner Note: Only test the other leg if three trials were not possible on the first leg. This should be the length of the other leg to be tested.)

. meters

7 Which other leg is being tested? **otherleg**

Right Leg

Left Leg

Test not performed

Go to Question #9

Tri al	Maximum Torque (Nm)	Max Rate Torque (Nm/sec)	Reaction Time (msec)	Time to 50% MVTD (msec)	Did participant have knee pain?
1.	maxtorq4	maxrate4	reaction4	mvtd4	<input type="radio"/> Yes <input type="radio"/> No ↓ Pain3 STOP. Go to Question #8
2.	maxtorq5	maxrate5	reaction5	mvtd5	<input type="radio"/> Yes <input type="radio"/> No ↓ pain4 STOP. Go to Question #8
3.	maxtorq6	maxrate6	reaction6	mvtd6	Test Complete. Go to Question #8.

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8 What size connecting rod was used? *rodsiz*

- Small Medium Large

9 Was the participant able to complete the isometric strength test? *complete*

- Yes No

Why not?

(Examiner Note: Check all that apply.)

- Not eligible: bilateral knee replacement *kneerepl*
 Knee pain *kneepain*
 Equipment problems *problems*
 Participant refused *refused*
 Participant fatigue *fatigue*
 Other **(Please Specify: othertxt** _____
