Pediatric Mobility – Short Form 8a

Please respond to each question or statement by marking one box per row.

	In the past 7 days…	With no trouble	With a little trouble	With some trouble	With a lot of trouble	Not able to do
235R1r	I could do sports and exercise that other kids my age could do.....	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1
4124R1r	I could get up from the floor	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1
236R1r	I could keep up when I played with other kids	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1
3892R1r	I could move my legs	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1
2646R1r	I could stand up by myself	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1
4185R1r	I could stand up on my tiptoes	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1
2707R2r	I could walk up stairs without holding on to anything.....	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1
5023R1r	I have been physically able to do the activities I enjoy most	☐ 5	☐ 4	☐ 3	☐ 2	☐ 1

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