

PROSTHETIC DEVICE TRIAL ACTIVITY CHECKLIST

Prosthetic Foot:
Prosthetic Knee:

Date:

Activities

Notes

Walking: slow, regular, fast	
Running	
Sitting: coming in from different angles	
Standing: on varying slopes and terrain	
Figure 8 walking	
Kneeling on both knees	
Picking up object off floor	
Descending ramps of varying slopes	
Ascending ramps of varying slopes	
Descending stairs	
Ascending stairs	
Walking over solid objects: tree roots, large rocks, clumpy grass	
Walking over loose objects: gravel, landscaping rocks, sand	
Getting into and out of car	
Exercise Activities: squats, planks, lunges, bicycle, elliptical, treadmill	
Wearing various shoes	
Doing your own specific hobbies or occupation	

With each activity note:

Any changes in feel of gait?

Any changes in pressure points in socket?

Any changes in back, hip or knee pain in sound leg or limb difference leg?

Any changes in stability?

Any changes in energy expenditure?