

		Site ID code:	Participants Study Number:					Participant Initials:			
C	K	X	X	1	0	0	0	1	X	X	X

DOB: 01/Jan/19XX Principal Investigator: Name Here Date 01/Jan/2016

Assessment and Advice

- CORKA assessment form completed? Yes No
- Information booklet given? Yes No
- Participant treatment diary given out? Yes No
- Participant has completed the goal setting page of diary? Yes No

Task practice

- 1-3 Tasks identified from assessment? Yes No
- Tasks practiced Yes No
- Advice and pointers for tasks recorded in patient diary Yes No

Range of movement

- Participant given a knee flexion exercise (section 1)? Yes No
- Participant given a knee extension exercise (section 2)? Yes No

Basic Quadriceps Strengthening

- Basic quadriceps strength exercise given (section 3)? Yes No

Strengthening exercise

- Participant given quadriceps exercise (section 4)? Yes No
- Participant given hamstrings exercise (section 5)? Yes No

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1	0	0	0
1			
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- Participant given hip abductor exercise (section 6)? Yes No
- Participant given calf exercise (section 7)? Yes No
- All exercises recorded in the participant's diary? Yes No

Static Balance

- Static balance exercise (section 8)? Yes No

Gait Skills

- Participant started on gait skills exercise (section 9)? Yes No

Additional exercises

- Any additional exercises given Yes No
- If so what exercises? _____

Was the participant discharged? Yes No

Notes

Name _____

Signature _____