772			
RENAL INSURAN	Participant ID:		Participant Initials:
SHOOT SHOOT	Clinical Center:	Site:	Visit Number:
COMORT STUDY	CRF Date:		RC ID:
	HAND	GRIP DYNAMOME	ETER
1. Technician ID:			
"In this exercise, I am	going to use this instrumer	nt to test the strength i	n your hand".
PRE-TEST QUESTION	NS		
2. Which hand do you □₁ Ri	u use to sign your name? (ght \square_2 Left	(Dominant hand)	
3. Do you have pain	or arthritis in this hand or v	wrist? (Dominant hand)	
□ ₁ Ye			
□ _o No	Procee	d to Q#4	
•	ou think it would be safe to		
·	res — → Procee		
	lo — Procee		
ADJUST THE HAND (RECORD THE HAND	CDID SETTING	T THE PARTICIPANT	'S FINGERS BEND AT A RIGHT ANGLE AND
4. Hand Grip Side:	☐ ₁ Right	□ ₂ Left	
5. Hand Grip Setting:	·	□ ₉₇ Not Done	
TESTING			
ARM AGAINST THE E	BODY AND ELBOW ON T s test three times. If you v neeze', squeeze as hard as	THE TABLE. would like to stop the te	the device" DEMONSTRATE WITH UPPER est due to pain or discomfort, tell me and we will es will not move, but I will be able to read the
DEMONSTRATE.	ay 'ready, begin'" R	Ready begin "	
WHEN THE PARTICIF INSTRUCT THE PART EACH TEST.	PANT BEGINS, SAY, "Squ	ueeze, squeeze, squee EIR GRIP BUT CONTI	INUE TO HOLD THE DEVICE BETWEEN

6.	Hand	Grip	Stren	qth:

6.1	D ₉₇ Not Done	6.2	_ □ ₉₇ Not Done	6.3	D ₉₇ Not Done

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HAND GRIP DYNAMOMETER

POSTTEST

1.	nd pain limit your ability to do the test for all three attempts?
	\square_1 Yes \square_0 No
8.	Reason for missing data: (Check ONE response only)
	☐ ₁ Physical Limitation
	□ ₂ Instrument Problem
	□ ₃ Not attempted, examiner deemed unsafe
	Not attempted, participant felt unsafe
	☐ ₉₉ Not Applicable

