



HIGHLIGHTS FROM THE REHABILITATION MEASURES DATABASE



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MEASUREMENT CHARACTERISTICS AND CLINICAL UTILITY OF THE 6-MINUTE WALK TEST AMONG INDIVIDUALS WITH SPINAL CORD INJURY

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Approximately 68% of individuals who sustain a spinal cord injury (SCI) regain walking ability.¹ Many recent studies have indicated that individuals with incomplete SCI have much greater capacity to achieve independent ambulation if provided intensive walking training.² As a result of this research, many rehabilitation efforts now focus on recovery of walking in patients with this potential. Only a few gait-related measurements have been tested for reliability and validity in the SCI population. The 6-Minute Walk Test (6MWT) measures the distance an individual can ambulate in 6 minutes. The test has been assessed for reliability and validity in many populations, and it has demonstrated excellent reliability and adequate to excellent validity in individuals with

incomplete SCI. It has also demonstrated sensitivity to change in the acute stages of recovery and 6 months postinjury. Normative values allow clinicians to compare individuals with SCI to individuals without neurologic injury. The 6MWT is free and requires minimal equipment, which makes it feasible for routine use in clinical practice.

This Rehabilitation Measures Database summary provides a review of the psychometric properties of the 6MWT in the SCI population, including reliability, validity, and normative values. A full review of the 6MWT and reviews of over 100 other instruments can be found at www.rehabmeasures.org.

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This instrument summary is designed to facilitate the selection of outcome measures by trained clinicians. The information contained in this summary represents a sample of the peer-reviewed research available at the time of this summary's publication. The information contained in this summary does not constitute an endorsement of this instrument for clinical practice. The views expressed are those of the summary authors and do not represent those of authors' employers, instrument owner(s), the Archives of Physical Medicine and Rehabilitation, the Rehabilitation Measures Database, or the United States Department of Education. The information contained in this summary has not been reviewed externally.

The Rehabilitation Measures Database and Instrument Summary Tearsheets are funded by the National Institute on Disability and Rehabilitation Research, United States Department of Education through the Rehabilitation Research and Training Center on Improving Measurement of Medical Rehabilitation Outcomes (H133B090024), and the Retirement Research Foundation grant entitled Enhancing Clinicians' Ability to Assess, Monitor and Appropriately Treat Older Individuals Undergoing Rehabilitation.

