



# Archives of Physical Medicine and Rehabilitation

Editors' Selections From This Issue: Volume 101 / Number 1 / January 2020

## TOP PAPERS IN THE ARCHIVES

For the most-cited and downloaded articles published in the *Archives of Physical Medicine and Rehabilitation* during the past two years go to <http://ACRM.org/toppapers>.

## REHABCAST

The audio hub for rehabilitation medicine produced by the *Archives of Physical Medicine and Rehabilitation*, the field's top journal. Hosted by Dr. Ford Vox, each episode features in-depth interviews with scientists publishing in the journal and news briefs relevant to all rehabilitation clinicians. Our growing collection of podcasts, is available at [http://www.archives-pmr.org/content/podcast\\_collection](http://www.archives-pmr.org/content/podcast_collection).

## MEASUREMENT TOOL

See *Measurement Characteristics and Clinical Utility of the Kohlman Evaluation of Living Skills (KELS) Among Older Adults*, by Mercer, et al on page 173. Measurement Tools, from the Rehabilitation Measures Database, are designed to facilitate the selection of outcome measures by clinicians. Previously published Tools are available at <http://www.archivespmr.org/content/measurementtools>.

## ACRM 2020

Join us in Atlanta for ACRM 2020! Call for Proposals is now open. Go to [ACRM.org/2020](http://ACRM.org/2020) for details.

## Traumatic Brain Injury–Quality of Life (TBI-QOL) Special Section

The Traumatic Brain Injury–Quality of Life (TBI-QOL) Measurement System was developed by the National Institute of Health (NIH). NIH leaders reasoned that more precise measures would result in more reliable clinical trials that could be conducted more efficiently. Through its roadmap initiative, NIH funded the PROMIS (Patient Reported Outcome Measurement Information System) initiative in 2004 to develop such measures. Based on the initial successes of PROMIS, NeuroQoL evolved offering measures more specific to individuals with neurological disorders. These initial efforts paved the way for measures specific to populations served by rehabilitation providers. This special issue includes articles describing the development and refinement one set of such measures: the TBIQoL measurement system. Articles by Heinemann, Kisala, Carlozzi and associates on the development of TBIQoL scales for independence, social participation, and pain interference describe these techniques. ■ SEE THE FULL ARTICLE AT PAGE 11

## Effects of Motor Skill-Based Training on Wheelchair Propulsion Biomechanics in Older Adults: A Randomized Controlled Trial

MacGillivray and colleagues investigated whether motor skill-based training improves wheeling biomechanics in older adults and whether transfer or retention occurs. Older adults (N=34) were randomized to one of 3 groups: experimental group with 6 motor skilled-based training sessions, active control group with dose-matched uninstructed practice, and the inactive control group. The experimental group sessions consisted of two five-minute blocks of wheelchair propulsion training, separated by five minutes of break, for a total of 60 minutes of wheeling. Breaks included education and discussion related to wheelchair propulsion. The training group significantly increased push angle and decreased push frequency compared to the practice and control groups, and these gains were retained over time and transferred to overground wheeling on tile. The dose-matched practice group did not differ from the inactive control group for any variables. The authors conclude that 6 training sessions are effective for improving some biomechanical variables. ■ SEE THE FULL ARTICLE AT PAGE 1

## Burn Rehabilitation Special Supplement

A special supplement to the Archives of Physical Medicine and Rehabilitation in 2007 reported selected findings of research from the first 13 years of the Burn Model Systems (BMS) Centers and Database Coordinating Center. This special supplement is the second such effort and reports on the growth of the BMS National Longitudinal Database (BMS NDB) since that time as well as select new research findings from the BMS centers. The Model System Program began in the 1970s with the development of the Spinal Cord Injury Model System and grew to include the Traumatic Brain Injury Model System and BMS. The BMS was initially funded by the National Institute on Disability and Rehabilitation Research (NIDRR) and continues to be funded by the agency under its expanded name, the National Institute on Disability, Independent Living and Rehabilitation Research (NIDILRR). The BMS program conducts research to improve care and outcomes for people with burn injuries. Contributions to this supplement include select findings from both site-specific and multi-center collaborations.