

Filling out the excel sheet to obtain scale scores

Background

Child-ID	0000	Score form PERF-FIT	
Name:		Date of birth:	
Address:		Test date:	
School:		Age:	
Examined by:		Sex:	
Reason for referral:		By:	

Enter information of the child and ID.

Enter date of birth and test date in this format: 10-2-2025 (day month year).

Age: use pull-down menu for Age, choose between 6-12 years.

Sex: use pull-down menu for sex choose either Boy or Girl.

Power and Agility Scale

Item				Best or Total Score
Running time (s)	Trial1	Trial2	Extra Trial	
Running Mistakes (#)	Trial1	Trial2	Extra Trial	
Stepping time (s)	Trial1	Trial2	Extra Trial	
Stepping Mistakes (#)	Trial1	Trial2	Extra Trial	
Side jump (#)	Trial1		Trial2	
Long jump (cm)	Trial1		Trial2	
Overhead throw (cm)	Trial1		Trial2	

Item 1 and 2

Enter raw scores of the items 1 and 2 with 2 decimals.

Running time: trial 1 and 2 for instance 6,92. (dots or commas depend on your regional settings and format).

Running mistakes: add number of mistakes in.

If more than 3 mistakes in one of the trials of item 1 or 2 fill out the extra trial.

Items 3, 4 and 5

Side jump, Long jump, Overhead throw, always have 2 trials

The best score comes up automatically.

Performance Scale

Item 6 and 7

10 balls per item	Two hands	Pref hand	Non-Pref	PH clap	NPH clap
Bouncing (max 50)					
Throwing (max 50)					

Bouncing and Throwing: Enter number of correctly caught balls. If not enough balls are caught to continue the series (6 or more), the next cell will be grey. (So, you can't enter a score).

Total score per item will come up automatically.

Item 8 and 9

Static Balance Hug Right (Max 15)	Trial1	Trial2
Static Balance Hug Left (Max 15)	Trial1	Trial2
Static Balance Toe Right (Max 15)	Trial1	Trial2
Static Balance Toe Left (Max 15)	Trial1	Trial2
Total Static Balance (Max 60 s)	Static Hug R + L + Static Toe R + L	
Dynamic Balance Hug (Max 8)	Trial1	Trial2
Dynamic Balance Toe (Max 8)	Trial1	Trial2
Cans R (Max 8) Not able to stand 3 sec on R enter 0	Close	Far
Cans L (Max 8) Not able to stand 3 sec on L enter 0	Close	Far
Total Dynamic Balance (Max 32 points)	Dynamic Hug + Toe + Cans close + Cans far	

Balance items: enter seconds for static items or steps for dynamic items. If max score is achieved on first trial the cell for the second trial will turn grey (So, you don't enter a score).

If children are not able to stand on one leg for 3 sec in Static balance items, don't administer Can task for that leg. Cell becomes gray.

Total score for balance items will come up automatically.

Item 10

Jump Hop	Every square	Every other	5 cm	10cm
Jump Trial1				
Jump Trial2				
Hop Right Trial 1				
Hop Right Trial 2				
Hop Left Trial 1				
Hop Left Trial 2				
Total Jump Hop (max 60 points)	Jump + Hop right + Hop left			

Jump and hop items: enter number of correct jumps or hops for each task in the series (every square, every other square, 5 cm and 10 cm foam).

Keep in mind the discontinuation rule which is 5 for the "every square" task and 3 for the rest of the series. The child has two trials to reach this required score. If maximum score is reached in first trial, then the cell for the second trial will be grey. So, you can't enter a score. If the child does not reach the required score to continue (discontinuation rule) the cell will also turn grey.

Finding scale scores

Item				Best or Total Score	Item Scaled Score
Running time (s)	7,80	5,70	6,00	8,00	
Running Mistakes (#)	4	5	4		13
Stepping time (s)	15,78	14,67	Extra Trial	15,67	
Stepping Mistakes (#)	1	2	Extra Trial		13

Once all raw data are entered, you need to look up the value of the Best or Total score in the pull-down menu in the yellow cells.

Choose the value just below or equal to the values in the pull-down menu of the child's best or total raw score.

- Example 1: the child's raw score equals 29 (grey cell). Select 29 in the pull-down and in this case the scale score (blue) is 12.

29	12	29,00
17		0
16		8
15		16
48	10	18
		19
		22
		23
		25
		28
		29
		30

- Example 2: If the exact value is not shown in the menu, select the value that is closest to the raw value, but lower. For instance, if a raw score of 48 (grey cell) needs to be converted to a scale score, the value 44 would be the first value below that score. In this case the scale score (blue cell) is 10.

48	10	44,00
Total Scaled Score	5	34
Total Scaled Score	7	86

Repeat this procedure for all variables as well as for the total scores.

Total Score Agility and Power	Percentile	50,0	Total Scale Score	10	51
Total Score Performance	Percentile	15,9	Total Scale Score	7	39
Total Score PERF-FIT	Percentile	25,8	Total Scale Score	8	90
Total Score Performance	Percentile	2,3	Total Scale Score	4	29
Total Score PERF-FIT	Percentile	15,9	Total Scale Score	7	81

Percentile and classification (with classification color) will come up automatically. Green normal range, orange at risk (below average), red severe impairment (well below average).

Saving data for future use.

Child-ID	0003	Score form PERF-FIT			
Name:	Dntwe	Date of birth:		NB: FIRST print this form as PDF! After printing: press <ctrl>-k to pass the results to the list and clear this form.	
Address:	PS	Test date:			
School:	BSO	Age:	6		
Examined by:	Claire	Sex:	Girl		
Reason for referral:	Motor Delay?	By:	PE teacher		

After filling out the form and having obtained the scale scores and percentiles, the sheet can be printed or saved as pdf in the patient file or for the parents.

The data can be saved based on child ID (no name or personal information) in the spread sheet by using <CRT>-K. Only ID Sex Age and test outcomes are transferred.

Child-ID	Ready	Gender	Age	LadderRunningTime1	LadderRunningMistakes1	LadderRunningTime2	LadderRunningMistakes2	LadderRunningTimeExtra	LadderRunningMistakesExtra	RunningBest	RunningScale	LadderSteppingTime1
0001												
0002		Boy	12	5,59	0	5,04		1 Extra Trial	Extra Trial	5,54	12	11,63
0003												
0004												

For clinical use, be sure that you can link the Child ID back to the child.

Example empty score form

Child-ID	0000	Score form PERF-FIT					
Name:		Date of birth:		NB: FIRST print this form as PDF! After printing: press <ctrl>-k to pass the results to the list and clear this form.			
Address:		Test date:					
School:		Age:					
Examined by:		Sex:					
Reason for referral:		By:					
Item						Best or Total Score	Item Scale Score
Running time (s)	Trial1	Trial2	Extra Trial				
Running Mistakes (#)	Trial1	Trial2	Extra Trial				#N/A
Stepping time (s)	Trial1	Trial2	Extra Trial				
Stepping Mistakes (#)	Trial1	Trial2	Extra Trial				#N/A
Side jump (#)	Trial1		Trial2				#N/A
Long jump (cm)	Trial1		Trial2				#N/A
Overhead throw (cm)	Trial1		Trial2				#N/A
Total Score Agility and Power	Percentile	#N/A		Total Scale Score	#N/A	#N/A	
10 balls per item	Two hands	Pref hand	Non-Pref	PH clap	NPH clap		
Bouncing (max 50)							#N/A
Throwing (max 50)							#N/A
Static Balance Hug Right (Max 15)	Trial1		Trial2				
Static Balance Hug Left (Max 15)	Trial1		Trial2				
Static Balance Foot Right (Max 15)	Trial1		Trial2				
Static Balance Foot Left (Max 15)	Trial1		Trial2				
Total Static Balance (Max 60 s)	Static Hug R + L + Static Toe R + L						
Dynamic Balance Hug (Max 8)	Trial1		Trial2				
Dynamic Balance Foot (Max 8)	Trial1		Trial2				
Cans R (Max 8) Not able to stand 3 sec on R enter 0	Close		Far				
Cans L (Max 8) Not able to stand 3 sec on L enter 0	Close		Far				
Total Dynamic Balance (Max 32 points)	Dynamic Hug + Toe + Cans close + Cans far						
Jump Hop	Every square	Every other	5 cm	10cm			
Jump Trial1							
Jump Trial2							
Hop Right Trial 1							
Hop Right Trial 2							
Hop Left Trial 1							
Hop Left Trial 2							
Total Jump Hop (max 60 points)	Jump + Hop right + Hop left						
Total Score Performance	Percentile	#N/A		Total Scale Score	#N/A	#N/A	
Total Score PERF-FIT	Percentile	#N/A		Total Scale Score	#N/A	#N/A	
Summary of test observations							
Actions							

Example saved score form

Child-ID	0003	Score form PERF-FIT					
Name:	Dntwe	Date of birth:		NB: FIRST print this form as PDF! After printing: press <ctrl>-k to pass the results to the list and clear this form.			
Address:	PS	Test date:					
School:	BSO	Age:	6				
Examined by:	Claire	Sex:	Girl				
Reason for referral:	Motor Delay?	By:	PE teacher				
Item						Best or Total Score	Item Scale Score
Running time (s)	8,10	9,00	Extra Trial			8,10	
Running Mistakes (#)	0	1	Extra Trial				13
Stepping time (s)	22,40	26,00	Extra Trial			22,90	
Stepping Mistakes (#)	1	2	Extra Trial				8
Side jump (#)	18		15			18	12
Long jump (cm)	101		93			101	12
Overhead throw (cm)	98		110			110	7
Total Score Agility and Power	Percentile	50,0			Total Scale Score	10	52
10 balls per item	Two hands	Pref hand	Non-Pref	PH clap	NPH clap		
Bouncing (max 50)	5					5	7
Throwing (max 50)	3					3	5
Static Balance Hug Right (Max 15)	5,0		5,0			5,0	
Static Balance Hug Left (Max 15)	7,0		2,0			7,0	
Static Balance Foot Right (Max 15)	6,0		10,0			10,0	
Static Balance Foot Left (Max 15)	2,0		4,0			4,0	
Total Static Balance (Max 60 s)	Static Hug R + L + Static Toe R + L					26,0	6
Dynamic Balance Hug (Max 8)	6		4			6	
Dynamic Balance Foot (Max 8)	4		5			5	
Cans R (Max 8) Not able to stand 3 sec on R enter 0	0		0				
Cans L (Max 8) Not able to stand 3 sec on L enter 0	0		1			1	
Total Dynamic Balance (Max 32 points)	Dynamic Hug + Toe + Cans close + Cans far					12	5
Jump Hop	Every square	Every other	5 cm	10cm			
Jump Trial1	7	3	4	3	18		
Jump Trial2	3	4		3			
Hop Right Trial 1	5	1			7		
Hop Right Trial 2	6	0					
Hop Left Trial 1	0						
Hop Left Trial 2	0						
Total Jump Hop (max 60 points)	Jump + Hop right + Hop left				25	7	
Total Score Performance	Percentile	2,3			Total Scale Score	4	30
Total Score PERF-FIT	Percentile	15,9			Total Scale Score	7	82
Summary of test observations							
Actions							