

Prosthetic Limb Users Survey of Mobility (PLUS-M)

Version 1.2 – English (US)

Short Forms Users Guide

September 16, 2022

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Please cite the PLUS-M™ 7-item Short Forms as follows:

Prosthetic Limb Users Survey of Mobility (PLUS-M™) 7-item Short Form (v1.2). http://www.plus-m.org. Accessed on [insert date].

Please cite the PLUS-M™ 12-item Short Form as follows:

Prosthetic Limb Users Survey of Mobility (PLUS-M™) 12-item Short Form (v1.2). http://www.plus-m.org. Accessed on [insert date].

Please cite the PLUS-M™ Scoring Guide as follows:

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Prosthetic Limb Users Survey of Mobility (PLUS-M™) short forms were developed under funding from the National Center for Medical Rehabilitation Research (NCMRR), National Institute of Child Health and Human Development (NIH grant number HD-065340, PI: Hafner) and the Orthotics and Prosthetics Education and Research Foundation, Inc. (OPERF grant number OPERF-2014-SGA-1).

Terms of Use for PLUS-M™ Short Forms

PLUS-M[™] short forms are free for non-commercial use. Examples of non-commercial use include administration of paper surveys in clinical practices for the purposes of monitoring patients or administration in research for the purposes of assessing study participants. Presentation or publication of results using PLUS-M[™] short forms should include a statement that indicates which instrument (including version number) was used and a reference to the PLUS-M[™] website (www.plus-m.org).

Permission to use PLUS-M[™] short forms do not grant permission to modify the wording or layout of items, to distribute to others in any form, or to translate items into any other language. Permission to modify, distribute, or translate must be requested in writing from the study principal investigator, Brian J. Hafner, PhD (bhafner@uw.edu).

Questions about PLUS-M™ Short Forms

If you have questions about PLUS-M™ short forms or their use in clinical care or research, please contact the University of Washington Center on Outcomes Research in Rehabilitation (UWCORR):

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Box 354237
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Brief Overview of the Prosthetic Limb Users Survey of Mobility (PLUS-M™)

Construct: PLUS-M™ instruments measure prosthesis users' mobility (i.e., their ability to move intentionally and independently from one place to another). Individual PLUS-M™ questions assess respondents' perceived ability to carry out specific activities that require use of both lower limbs. PLUS-M™ questions cover movements that range from basic ambulation (e.g., walking a short distance indoors) to complex activities (e.g., hiking for long distances over uneven ground). PLUS-M™ response options reflect the degree of difficulty with which respondents report they can carry out these activities.

Intended applications: PLUS-M™ instruments are intended for use in research and clinical care.

<u>Intended population</u>: PLUS-M[™] instruments are intended for use with adults (age 18+) with lower limb amputation who have experience using a prosthesis.

Formats: PLUS-M™ instruments are based on a set of calibrated questions called the PLUS-M™ item bank. The PLUS-M™ 7- and 12-item short forms included in this guide are subsets of questions in the PLUS-M™ Version 1 item bank. All items on the PLUS-M™ 7-item short form are also included in the PLUS-M™ 12-item short form. A PLUS-M™ Computer Adaptive Test (CAT) is under development and will offer an optimal combination of high measurement precision and low administrative burden. (Please see www.plus-m.org for updates on the PLUS-M™ CAT).

<u>Administration and scoring time</u>: PLUS-M™ short forms require 2-3 minutes to administer and 1-2 minutes to score.

Score: PLUS-M™ Version 1.x instruments provide a T-score that ranges from 23.3 to 69.9 (PLUS-M™ 7- short form) or 21.8 to 71.4 (PLUS-M™ 12-item short form).

Score interpretation: PLUS-M™ Version 1.x T-scores are referenced to the original PLUS-M™ development sample (n=1091 unilateral lower limb prosthesis users) described in this manual. A T-score has a mean of 50 and a standard deviation (SD) of 10. A PLUS-M™ T-score of 50 represents the mean mobility reported by the development sample (i.e., people with unilateral amputation). A higher PLUS-M™ T-score corresponds to greater mobility. Individual PLUS-M™ T-scores may also be compared to those reported by the development sample or to those reported by subgroups (by level of amputation, etiology of amputation, gender, and age) within the development sample. Development Sample data (n=1091) and Bilateral Reference Sample data (n=206) are included in the PLUS-M™ Short Form Users Guide.

<u>Languages</u>: PLUS-M[™] instruments were developed in English, but have been translated for use with respondents who read other languages. Please see <u>www.plus-m.org</u> for information on the status of PLUS-M[™] instrument translations.

Introduction

The Prosthetic Limb Users Survey of Mobility (PLUS-M™) is a self-report instrument for measuring mobility of adults with lower limb amputation. It has been rigorously developed using modern psychometric methodology and is intended for use in clinical practice and research. This guide will assist you in the selection of a PLUS-M™ short form, administration and scoring of the instruments, and interpretation of the scores.

PLUS-M™ instruments measure prosthetic users' mobility (i.e., the ability to move intentionally and independently from one place to another). PLUS-M™ questions assess respondents' perceived ability to carry out actions that require use of both lower limbs, ranging from household ambulation to outdoor recreational activities. The described activities relate to two primary forms of movement, locomotion (i.e., movement in a continuous, repeatable pattern) and/or postural transitions (i.e., movement from one position to another or one type of activity to another). Activities described by PLUS-M™ questions are often qualified by language that describes the setting or situation in which the activity would be performed (e.g., walking down stairs *with* a railing). Unintentional movements (e.g., falls) and movements performed with the physical assistance of another person (e.g., assisted transfers) are not intended to be measured with this instrument. Further, PLUS-M™ instruments are not intended to measure mobility with seated or wheeled assistive devices (e.g. a wheelchair).

All PLUS-M™ questions begin with "Are you able to...," followed by a description of the activity. No time frame is provided and respondents' current perception of their mobility is implied. PLUS-M™ responses reflect the difficulty with which the respondents' report they could perform the activity. Response options include "without any difficulty," "with much difficulty," "with some difficulty," "with a little difficulty," and "unable to do." It is important to note that PLUS-M™ questions assess respondents' reported *ability* to perform activities rather than individuals' actual *performance* of that activity.

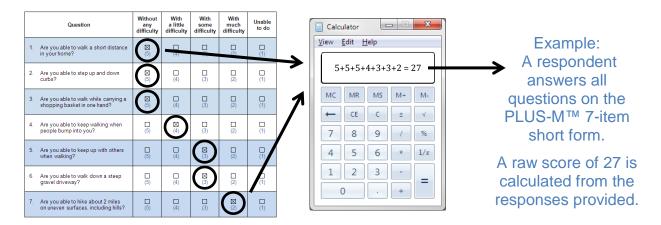
Although PLUS-M™ instruments have been purposefully developed to be used with a range of prosthesis users (see "Development Sample"), it has not yet been thoroughly tested across the entire population of persons with limb loss. Psychometric functioning of PLUS-M™ instruments has not yet been investigated with persons with both lower and upper limb loss or persons with less than six months experience using a prosthesis. Therefore, validity of a PLUS-M™ score in persons with these characteristics cannot be assumed. PLUS-M™ users are encouraged to check for updates to PLUS-M™ instruments, scoring guides, or additional evidence of validity at www.plus-m.org.

Scoring Complete PLUS-M™ Short Forms

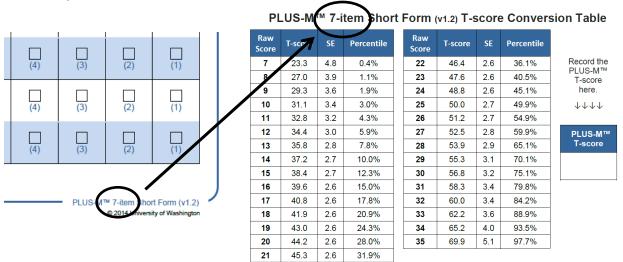
This section of the guide describes how to score PLUS-M[™] short forms when <u>all</u> of the questions on the short form have been answered. If any questions have been skipped by the respondent, please refer to the section of this guide titled "Scoring Incomplete PLUS-M[™] Short Forms."

Scoring a PLUS-M[™] short form will produce a T-score. *Raw scores*, which are obtained by summing responses to each question, should <u>only</u> be used to look up PLUS-M[™] *T-scores* using the tables in this manual. <u>Only PLUS-M[™] T-scores should be reported</u>. T-scores are valid and comparable measures of mobility, but raw scores are not. To obtain a PLUS-M[™] T-score, follow the steps below:

Step 1: Calculate the Raw Score. Each PLUS-M™ question has five response options. Responses to each question are scored from 1 to 5 (i.e., without any difficulty = 5, with a little difficulty = 4, with some difficulty = 3, with much difficulty = 2, unable to do = 1). To find the raw score, sum the values of the responses to each question on the short form. Use of a calculator is recommended. Raw scores range from 7 to 35 for the 7-item short form and from 12 to 60 for the 12-item short form.



Step 2: Choose the Appropriate Conversion Table. Each PLUS-M™ short form has a unique conversion table. Only the table that corresponds to the selected short form will produce the correct PLUS-M™ T-score. Choose the conversion table that corresponds to the short form you administered (e.g., choose the 7-item conversion table if you administered the 7-item short form).



Step 3: Look Up the T-Score. Look up the PLUS-M™ T-score that corresponds to the raw score you calculated in Step 1 on the conversion table. To document the PLUS-M™ T-score, enter it in the field provided (located next to the selected conversion table). If any questions have been skipped by the respondent, score the survey using the instructions found under "Scoring Incomplete PLUS-M™ Short Forms."

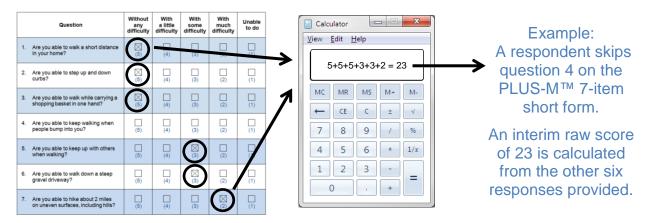
Raw Score	T-score	SE	Percentile		
22	46.4	2.6	36.1%	Record the	
23	47.6	2.6	40.5%	PLUS-M™ T-score	
24	48.8	2.6	45.1%	here.	
25	50.0	2.7	49.9%	$\downarrow\downarrow\downarrow\downarrow\downarrow$	
26	3 51.2	2.7	54.9%		Evample:
(27)	52.5	2.8	59.9%	PLUS-M™	Example: The raw score of 27 or
28	53.9	2.9	65.1%	T-score	the 7-item short form
29	55.3	3.1	70.1%	52.5	produces a PLUS-M ^T
30	56.8	3.2	75.1%	52.5	T-score of 52.5 on th
31	58.3	3.4	79.8%		7-item conversion tab
32	60.0	3.4	84.2%		Note: the table also
33	62.2	3.6	88.9%		indicates the responder reports higher mobility the
34	65.2	4.0	93.5%		59.9% of the PLUS-M ^T
35	69.9	5.1	97.7%		development sample.

Scoring Incomplete PLUS-M™ Short Forms

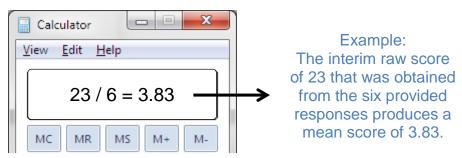
This section of the guide describes how to score PLUS-M[™] short forms when questions on the short form have been <u>skipped</u>. If all questions have been answered by the respondent, please refer to the section of this guide titled "Scoring Complete PLUS-M[™] Short Forms."

PLUS-M™ T-scores can be *approximated* if a respondent skips one or more questions. Scoring PLUS-M™ short forms with fewer than half of the responses completed is not recommended. Therefore, first verify that <u>at least 4 questions</u> on the PLUS-M™ 7-item short form or <u>at least 6 questions</u> on the PLUS-M™ 12-item short form have been answered. Then, follow the steps below to estimate a T-score.

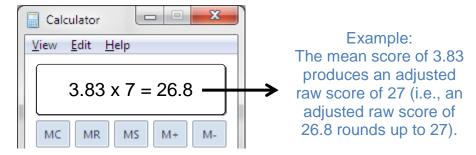
Step 1a: Calculate the Interim Raw Score. Sum the values of responses to all questions that were answered on the short form (see Step 1, above for more detail). This is your interim raw score.



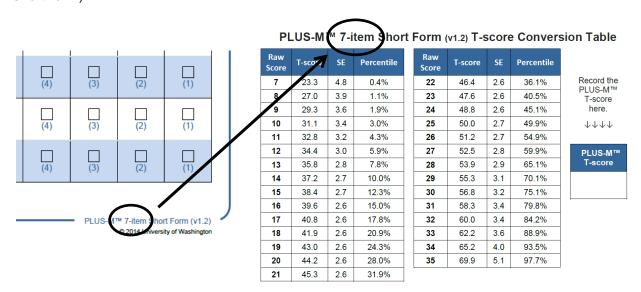
Step 2a: Calculate the Mean Score. Divide the interim raw score (Step 1a) by the number of items that <u>were answered</u>. This is your mean score.



Step 3a: Calculate an Adjusted Raw Score. Multiply the mean score (Step 2a) by the total number of items on the short form (i.e., 7 or 12). If the score is not an integer (i.e., whole number), round up to the next highest integer. This is your adjusted raw score.



Step 4a: Choose the Appropriate Conversion Table. Each PLUS-M™ short form has a unique conversion table. Only the table that corresponds to the selected short form will produce the correct PLUS-M™ T-score. Choose the conversion table that corresponds to the short form you administered (e.g., choose the 7-item conversion table if you administered the 7-item short form).



Step 5a: Look Up the T-Score. Look up the PLUS-M™ T-score that corresponds to the adjusted raw score you calculated in step 3a. Note that the standard error (SE) associated with an approximated PLUS-M™ T-score may be greater than that shown in the table. To document the PLUS-M™ approximated T-score, enter it in the field provided (located next to the selected conversion table). If all questions have been answered by the respondent, score the survey using the instructions found under "Scoring Complete PLUS-M™ Short Forms."

Raw Score	T-score	SE	Percentile		
22	46.4	2.6	36.1%	Record the	
23	47.6	2.6	40.5%	PLUS-M™ T-score	
24	48.8	2.6	45.1%	here.	
25	50.0	2.7	49.9%	$\downarrow\downarrow\downarrow\downarrow\downarrow$	
26	3 51.2	2.7	54.9%		Example:
(27)	52.5	2.8	59.9%	PLUS-M™	The adjusted raw score of
28	53.9	2.9	65.1%	T-score	27 produces a PLUS-M™
29	55.3	3.1	70.1%	52.5	T-score of 52.5 on the 7-
30	56.8	3.2	75.1%	52.5	item conversion table.
31	58.3	3.4	79.8%		Note: the table also
32	60.0	3.4	84.2%		indicates the respondent reports higher mobility than
33	62.2	3.6	88.9%		59.9% of the PLUS-M™
34	65.2	4.0	93.5%		development sample.
35	69.9	5.1	97.7%		

Interpreting PLUS-M™ T-Scores

The PLUS-M™ T-score is a standardized score with a mean of 50 and a standard deviation (SD) of 10. A higher PLUS-M™ T-score represents a higher level of mobility. The highest possible PLUS-M™ Version 1.x T-score is 76.6 (i.e., when a respondent reports "without any difficulty" for all 44 questions in the PLUS-M™ Version 1 item bank). The lowest possible Version 1.x T-score is 17.5 (i.e., when a respondent reports "unable to do" for all 44 questions in the PLUS-M™ Version 1 item bank). T-scores are also comparable across all PLUS-M™ instruments. This means that a PLUS-M™ score obtained by a respondent using the 7-item short form may be compared directly to a score obtained by a respondent using the 12-item short form.

PLUS-M[™] T-scores are centered on 50. A T-score of 50 is equivalent to the mean score reported by unilateral lower limb prosthesis users included in the PLUS-M[™] development study (see "Development Sample"). Based on a normal distribution of PLUS-M[™] T-scores, 50% of individuals with unilateral lower-limb amputation are expected to have a T-score of 50 or higher. A respondent that receives a T-score of 60 has reported a level of mobility approximately 1 standard deviation *above* the mean reported by prosthesis users in the Development Sample. Therefore, approximately 84% of the people in the PLUS-M[™] development sample reported lower mobility than that respondent (Figure 1).

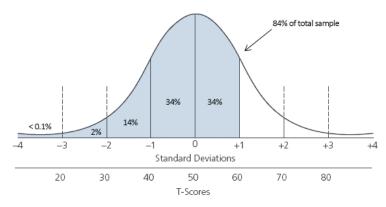


Figure 1 – A PLUS-M™ T-score of 60 indicates that approximately 84 percent of persons in the development sample reported lower mobility, as reflected by the shaded area.

Conversely, a respondent that receives a T-score of 40 has reported their mobility to be about one standard deviation *below* the mean reported by prosthesis users in the Development Sample. This means that only about 16% of the PLUS-M™ study sample reported their mobility to be lower than that respondent (Figure 2).

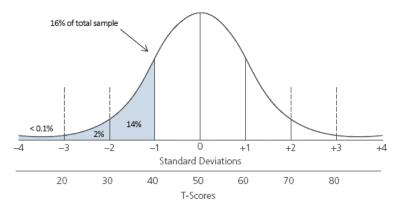


Figure 2 – A PLUS-M™ T-score of 40 indicates that approximately 16 percent of persons in the development sample reported lower mobility, as reflected by the shaded area.

PLUS-M™ T-score interpretation using development or reference sample data

Interpretation of PLUS-M™ T-Scores may be aided by comparison to scores reported by the subgroups within the development sample (e.g., persons with unilateral below-knee amputation and traumatic etiology) or bilateral reference sample (e.g., persons with bilateral below-knee amputations and non-dysvascular etiology). Comparison to the development or reference samples allows individual scores to be interpreted in context of persons with similar levels and etiologies of limb loss. Figure 3 and Figure 4 allow PLUS-M™ users to cross-reference PLUS-M™ T-Scores with an estimated location within the development or reference samples.

Example: A respondent with a transtibial amputation due to trauma receives a PLUS-M™ T-Score of 55. Figure 3 indicates that this score is higher than approximately 65% of the total development sample (black dashed line), but higher than about 42% of those who have a similar level and etiology of amputation. Thus, this respondent has lower mobility than most of those with this level and etiology of amputation, even though their T-Score is similar to the mean of the sample noted in Table 7.

Selecting PLUS-M™ Instruments

The PLUS-MTM Version 1 item bank contains 44 questions. Two fixed-length formats (i.e., PLUS-MTM Version 1.x short forms) are available: a 7-item short form and a 12-item short form. All items on the PLUS-MTM 7-item short form are included in the PLUS-MTM 12-item short form. T-scores obtained with use of either PLUS-MTM short form are highly correlated with T-scores obtained with use of all 44 PLUS-MTM questions (r > 0.96). Both PLUS-MTM short forms may therefore be used with confidence in most situations. PLUS-MTM short forms generally require about two (7-item) or three (12-item) minutes to administer. They require about one (7-item) or two (12-item) minutes to score.

The PLUS-M™ 7-item short form provides acceptable measurement precision (i.e., standard error less than 3.0) for most purposes. The PLUS-M™ 12-item short form provides greater measurement precision than the PLUS-M™ 7-item short form, particularly with prosthetic users with relatively low or higher-than-average mobility.

Selection of a PLUS-M™ instrument should be based on the importance of the decision(s) that will be made from the obtained T-score(s). The greater the consequences of the decision to be made, the more important it is to select an instrument with greater measurement precision. The PLUS-M™ 12-item short form is recommended in situations where mobility is a primary outcome (e.g., comparative effectiveness studies) or when important treatment decisions are to be made (e.g., prosthetic component selection). The PLUS-M™ 7-item short form provides adequate measurement precision (and lowers the respondent and administration burden, relative to the 12-item short form) in situations where mobility is a secondary outcome (e.g., epidemiological studies) or when patients' health is being monitored (e.g., outcomes databases).



Name: _	Date:	

Instructions: Please respond to all questions as if you were wearing the prosthetic leg(s) you use most days. If you would normally use a cane, crutch, or walker to perform the task, please answer the questions as if you were using that device.

Please choose "unable to do" if you:

- Would need help from another person to complete the task,
- Would need a wheelchair or scooter to complete the task, or
- Feel the task may be unsafe for you

Please mark one box per row.

	Question	Without any difficulty	With a little difficulty	With some difficulty	With much difficulty	Unable to do
1.	Are you able to walk a short distance in your home?	(5)	(4)	(3)	(2)	(1)
2.	Are you able to step up and down curbs?	(5)	(4)	(3)	(2)	(1)
3.	Are you able to walk across a parking lot?	(5)	(4)	(3)	(2)	(1)
4.	Are you able to walk over gravel surfaces?		(4)	(3)	(2)	(1)
5.	Are you able to move a chair from one room to another?	(5)	(4)	(3)	(2)	(1)
6.	Are you able to walk while carrying a shopping basket in one hand?	(5)	(4)	(3)	(2)	(1)
7.	Are you able to keep walking when people bump into you?	(5)	(4)	(3)	(2)	(1)
8.	Are you able to walk on an unlit street or sidewalk?	(5)	(4)	(3)	(2)	(1)
9.	Are you able to keep up with others when walking?	(5)	(4)	(3)	(2)	(1)
10.	Are you able to walk across a slippery floor?	(5)	(4)	(3)	(2)	(1)
11.	Are you able to walk down a steep gravel driveway?	(5)	(4)	(3)	(2)	(1)
12.	Are you able to hike about 2 miles on uneven surfaces, including hills?	(5)	(4)	(3)	(2)	(1)

PLUS-M™ 12-item Short Form (v1.2)



Scoring the PLUS-M™ 12-Item Short Form

PLUS-M™ short forms are scored with a <u>T-score</u>. To find the T-score, sum scores for all responses on the short form. This is the <u>raw score</u>. Do not use the raw score for any purpose other than to look up the T-score using the conversion table below. If any questions on the short form are <u>unanswered</u>, refer to the PLUS-M™ Short Form Users Guide for instructions on scoring *incomplete* short forms.

PLUS-M™ 12-item Short Form (v1.2) T-score Conversion Table

Raw Score	T-score	SE	Percentile
12	21.8	4.4	0.2%
13	25.2	3.4	0.7%
14	27.2	3.1	1.1%
15	28.7	2.9	1.6%
16	30.0	2.7	2.3%
17	31.2	2.5	3.0%
18	32.2	2.3	3.8%
19	33.2	2.2	4.6%
20	34.1	2.1	5.5%
21	34.9	2.1	6.5%
22	35.6	2.0	7.6%
23	36.4	2.0	8.6%
24	37.1	1.9	9.8%
25	37.7	1.9	11.0%
26	38.4	1.9	12.3%
27	39.0	1.9	13.6%
28	39.7	1.9	15.1%
29	40.3	1.9	16.6%
30	40.9	1.9	18.1%
31	41.5	1.9	19.8%
32	42.1	1.9	21.5%
33	42.7	1.9	23.3%
34	43.3	1.9	25.2%
35	43.9	1.9	27.2%
36	44.5	1.9	29.3%

Raw Score	T-score	SE	Percentile		
37	45.2	1.9	31.5%		
38	45.8	1.9	33.7%		
39	46.4	1.9	36.1%		
40	47.1	1.9	38.5%		
41	47.7	1.9	41.1%		
42	48.4	1.9	43.7%		
43	49.1	2.0	46.4%		
44	49.8	2.0	49.1%		
45	50.5	2.0	51.9%		
46	51.2	2.0	54.8%		
47	52.0	2.1	57.8%		
48	52.7	2.1	60.8%		
49	53.6	2.1	63.9%		
50	54.4	2.2	67.0%		
51	55.3	2.3	70.2%		
52	56.3	2.4	73.4%		
53	57.3	2.5	76.7%		
54	58.4	2.6	79.9%		
55	59.6	2.8	83.2%		
56	61.0	2.9	86.4%		
57	62.5	3.1	89.5%		
58	64.5	3.3	92.6%		
59	67.1	3.8	95.6%		
60	71.4	4.9	98.4%		

Record the PLUS-M™ T-score here.

 $\downarrow\downarrow\downarrow\downarrow\downarrow$

PLUS-M™ T-score

For T-scores with standard error (SE) greater than 3.0, use of the PLUS-M $^{\text{TM}}$ CAT (www.plus-m.org) is recommended to obtain better measurement precision. Percentile indicates the percent of the PLUS-M $^{\text{TM}}$ development sample that reported lower mobility than is reflected by the corresponding T-Score. For more information on interpretation of PLUS-M $^{\text{TM}}$ T-scores, please refer to the PLUS-M $^{\text{TM}}$ Short Form Users Guide.



Name:	Date:

Instructions: Please respond to all questions as if you were wearing the prosthetic leg(s) you use most days. If you would normally use a cane, crutch, or walker to perform the task, please answer the questions as if you were using that device.

Please choose "unable to do" if you:

- Would need help from another person to complete the task,
- Would need a wheelchair or scooter to complete the task, or
- Feel the task may be unsafe for you

Please mark one box per row.

	Question	Without any difficulty	With a little difficulty	With some difficulty	With much difficulty	Unable to do
1.	Are you able to walk a short distance in your home?	(5)	(4)	(3)	(2)	(1)
2.	Are you able to step up and down curbs?	(5)	(4)	(3)	(2)	(1)
3.	Are you able to walk while carrying a shopping basket in one hand?	(5)	(4)	(3)	(2)	(1)
4.	Are you able to keep walking when people bump into you?	(5)	(4)	(3)	(2)	(1)
5.	Are you able to keep up with others when walking?	(5)	(4)	(3)	(2)	(1)
6.	Are you able to walk down a steep gravel driveway?	(5)	(4)	(3)	(2)	(1)
7.	Are you able to hike about 2 miles on uneven surfaces, including hills?	(5)	(4)	(3)	(2)	(1)

www.plus-m.org



Scoring the PLUS-M™ 7-Item Short Form

PLUS-MTM short forms are scored with a <u>T-score</u>. To find the T-score, sum scores for all responses on the short form. This is the <u>raw score</u>. Do not use the raw score for any purpose other than to look up the T-score using the conversion table below. If any questions on the short form are <u>unanswered</u>, refer to the PLUS-MTM Short Form Users Guide for instructions on scoring *incomplete* short forms.

PLUS-M[™] 7-item Short Form (v1.2) T-score Conversion Table

Raw Score	T-score	SE	Percentile
7	23.3	4.8	0.4%
8	27.0	3.9	1.1%
9	29.3	3.6	1.9%
10	31.1	3.4	3.0%
11	32.8	3.2	4.3%
12	34.4	3.0	5.9%
13	35.8	2.8	7.8%
14	37.2	2.7	10.0%
15	38.4	2.7	12.3%
16	39.6	2.6	15.0%
17	40.8	2.6	17.8%
18	41.9	2.6	20.9%
19	43.0	2.6	24.3%
20	44.2	2.6	28.0%
21	45.3	2.6	31.9%

Raw Score	T-score	SE	Percentile		
22	46.4	2.6	36.1%		
23	47.6	2.6	40.5%		
24	48.8	2.6	45.1%		
25	50.0	2.7	49.9%		
26	51.2	2.7	54.9%		
27	52.5	2.8	59.9%		
28	53.9	2.9	65.1%		
29	55.3	3.1	70.1%		
30	56.8	3.2	75.1%		
31	58.3	3.4	79.8%		
32	60.0	3.4	84.2%		
33	62.2	3.6	88.9%		
34	65.2	4.0	93.5%		
35	69.9	5.1	97.7%		

Record the PLUS-M™ T-score here.

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PLUS-M™ T-score

For T-scores with standard error (SE) greater than 3.0, use of the PLUS-M $^{\text{TM}}$ 12-item short form or the PLUS-M $^{\text{TM}}$ CAT (<u>www.plus-m.org</u>) is recommended to obtain better measurement precision. Percentile indicates the percent of the PLUS-M $^{\text{TM}}$ development sample that reported lower mobility than is reflected by the corresponding T-Score. For more information on interpretation of PLUS-M $^{\text{TM}}$ T-scores, please refer to the PLUS-M $^{\text{TM}}$ Short Form Users Guide.

Unilateral Development Sample

Development sample characteristics are presented to facilitate interpretation of PLUS-M™ T-scores. These data may serve as expected or typical values for persons with <u>unilateral</u>, lower limb amputation. Data used to develop scoring for PLUS-M™ instruments were collected in a cross-sectional study of prosthesis users. Demographics and descriptive statistics are presented for the entire unilateral development sample (n=1091), as well as subgroups by gender, age, etiology of amputation, and level of amputation.

Data collection methods

Data was collected from unilateral prosthetic users with different levels and etiology of limb loss. Respondents in each of four subgroups (described under "target sample") were sought for participation in the study. Participants were recruited using flyers/posters in prosthetic clinics and hospitals, advertisements in consumer magazines, and postings on list-servs, websites, and social networks.

Target sample: Lower limb prosthesis users with:

- unilateral below-knee* amputation and traumatic etiology
- unilateral below-knee* amputation and traumatic etiology
- unilateral above-knee** amputation and dysvascular etiology
- unilateral above-knee** amputation and dysvascular etiology

Inclusion criteria: 18+ years of age

Ability to read English

Unilateral, lower limb amputation (at or above the ankle and below the hip)

Traumatic or dysvascular etiology of amputation Regular use of a prosthesis to stand, transfer, or walk

Exclusion criteria: Amputation in one or both arms

Surveys were administered by computer (i.e., online), paper, or phone, depending on respondent's preference. Surveys included all of the questions in the PLUS-M™ item bank, as well as demographic questions, and additional questions about respondents' health, mobility, and balance.

PLUS-M™ Unilateral development sample characteristics

Development sample data were collected from 1091 unique respondents between January and October, 2012. Demographics (Table 1), socioeconomic status (Table 2), health status (Table 3), and other characteristics (Table 4) of the unilateral development sample are provided.

^{* =} includes transtibial amputation and ankle disarticulation

^{** =} includes transfemoral amputation and knee disarticulation

Table 1 – PLUS-M™ unilateral development sample - demographics

Characteristic		Above-knee Dysvascular (n=120)		Below-knee Dysvascular (n=367)		Above-knee Trauma (n=266)		Below-knee Trauma (n=338)		Total Sample (n=1091)	
	n	%	n	%	n	%	n	%	n	%	
Gender											
Male	86	72%	261	71%	183	69%	238	70%	768	70%	
Female	34	28%	106	29%	81	30%	99	29%	320	29%	
Race/Ethnicity											
Non-Hispanic White	96	80%	285	78%	205	77%	285	84%	871	80%	
Non-Hispanic Black	16	13%	43	12%	26	10%	14	4%	99	9%	
Hispanic	3	3%	25	7%	21	8%	19	6%	68	6%	
Other	4	3%	12	3%	12	5%	18	5%	46	4%	
Not reported	1	1%	2	1%	2	1%	2	1%	7	1%	

Note: Percentages may not total 100 due to rounding

Table 2 – PLUS-M™ unilateral development sample - socioeconomic status

Characteristic	Dys	ve-knee /ascular =120)	Dysv	Below-knee Dysvascular (n=367)		Above-knee Trauma (n=266)		Below-knee Trauma (n=338)		otal Imple =1091)
	n	%	n	%	n	%	n	%	n	%
Education										
High school graduate or less	48	40%	116	32%	65	24%	90	27%	319	29%
Some college or tech school	45	38%	149	41%	90	34%	132	39%	416	38%
College graduate	16	13%	66	18%	65	24%	73	22%	220	20%
Advanced degree	11	9%	35	10%	43	16%	42	12%	131	12%
Employment										
Employed	15	13%	63	17%	108	41%	159	47%	345	32%
Homemaker	2	2%	7	2%	8	3%	15	4%	32	3%
Student	3	3%	4	1%	13	5%	12	4%	32	3%
Retired	48	40%	115	31%	50	19%	60	18%	273	25%
On disability	48	40%	163	44%	71	27%	67	20%	349	32%
Unemployed	4	3%	14	4%	14	5%	24	7%	56	5%
Individual Income										
<\$25,000	68	57%	213	58%	111	42%	124	37%	516	47%
\$25,000-\$39,999	26	22%	79	22%	45	17%	63	19%	213	20%
\$40,000-\$54,999	11	9%	26	7%	35	13%	38	11%	110	10%
\$55,000-\$69,999	7	6%	13	4%	21	8%	35	10%	76	7%
\$70,000-\$84,999	2	2%	14	4%	16	6%	26	8%	58	5%
\$85,000-\$99,999	0	0%	4	1%	16	6%	14	4%	34	3%
\$100,000+	4	3%	10	3%	14	5%	30	9%	58	5%

Note: Percentages may not total 100 due to rounding

Table 3 – PLUS-M™ unilateral development sample - health status

Characteristic	Above-knee Dysvascular (n=120)		Below-knee Dysvascular (n=367)		Above-knee Trauma (n=266)		Below-knee Trauma (n=338)		Total Sample (n=1091)	
	n	%	n	%	n	%	n	%	n	%
Health Conditions										
Asthma	13	11%	25	7%	19	7%	39	12%	96	9%
Arthritis	34	28%	110	30%	58	22%	74	22%	276	25%
Cancer	11	9%	18	5%	7	3%	11	3%	47	4%
Diabetes	56	47%	294	80%	10	4%	28	8%	388	36%
Digestive problems	9	8%	28	8%	12	5%	13	4%	62	6%
Heart trouble	41	34%	112	31%	9	3%	16	5%	178	16%
HIV or AIDS	1	1%	3	1%	1	0%	2	1%	7	1%
Kidney disease	9	8%	72	20%	3	1%	1	0%	85	8%
Liver problems	4	3%	7	2%	5	2%	1	0%	17	2%
Stroke	6	5%	18	5%	3	1%	2	1%	29	3%

Table 4 – PLUS-M™ unilateral development sample - other characteristics

Characteristic	Above-knee Dysvascular (n=120)		Below-knee Dysvascular (n=367)		Above-knee Trauma (n=266)			r-knee uma 338)	Total Sample (n=1091)		
	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD	
Age at time of survey (years)	61	12	59	11	51	14	51	14	55	13	
Age at amputation (years)	56	15	54	12	34	16	34	16	43	18	
Time since amputation (years)	5	5 6		5	18	17	17	16	12	14	
Prosthesis use per day (hours)	10	5	12	4	13 4		14 3		12	4	

Unilateral Development Sample PLUS-M™ T-Scores and percentile ranks

PLUS-M™ T-scores for unilateral development sample respondents are provided to facilitate interpretation of PLUS-M™ scores. Mean, 25th percentile, 50th percentile (median), 75th percentile, standard deviation, and range of T-scores are provided for the total sample (Table 5), males (Table 6), females (Table 7), persons under 35 years of age (Table 8), persons between 36 and 49 years of age (Table 9), persons between 50 and 64 years of age (Table 10), and persons over 64 years of age (Table 11). The T-Scores and percentile ranks provided in Tables 5-11 are based on unilateral development sample responses to all 44 questions in the PLUS-M™ Version 1 item bank. Unilateral development sample statistics are not provided when subgroups are smaller than 10 individuals.

Table 5 – PLUS-M™ T-scores and percentiles (total unilateral development sample)

PLUS-M T-Score	Above-knee Dysvascular (n=120)	Below-knee Dysvascular (n=367)	Above-knee Trauma (n=266)	Below-knee Trauma (n=338)	Total Sample (n=1091)
Mean	42.9	47.4	50.5	55.9	50.3
25 th Percentile	37.2	41.7	45.1	49.5	43.7
50 th Percentile (median)	42.6	47.2	50.1	55.4	50.0
75 th Percentile	49.7	53.3	55.3	61.8	56.3
Standard Deviation (SD)	9.0	8.9	8.1	9.3	9.8
Range (min – max)	17.5 – 67.0	21.9 - 73.6	25.7 - 76.6	31.8 - 76.6	17.5 - 76.6

Table 6 – PLUS-M™ T-scores and percentiles (males)

PLUS-M T-Score	Above-knee Dysvascular (n=86)	Below-knee Dysvascular (n=261)	Above-knee Trauma (n=183)	Below-knee Trauma (n=238)	Total Sample (n=768)
Mean	43.9	48.5	51.3	57.3	51.4
25 th Percentile	37.6	42.7	45.7	50.8	44.9
50 th Percentile (median)	44.6	48.0	50.9	57.0	51.2
75 th Percentile	49.8	54.6	56.0	63.5	57.6
Standard Deviation (SD)	8.4	8.7	8.1	9.3	9.8
Range (min – max)	24.1 – 67.0	21.9 - 73.6	25.7 - 76.6	31.8 - 76.6	21.9 - 76.6

Table 7 – PLUS-M™ T-scores and percentiles (females)

PLUS-M T-Score	Above-knee Dysvascular (n=34)	Below-knee Dysvascular (n=106)	Above-knee Trauma (n=81)	Below-knee Trauma (n=99)	Total Sample (n=320)
Mean	40.3	44.6	48.7	52.8	47.7
25 th Percentile	34.2	39.4	43.7	47.1	41.6
50 th Percentile (median)	39.6	43.7	48.6	53.8	47.6
75 th Percentile	45.8	49.7	52.5	58.1	54.3
Standard Deviation (SD)	9.9	8.6	7.7	8.4	9.4
Range (min – max)	17.5 - 62.8	25.4 - 73.2	33.3 - 68.5	35.4 - 76.6	17.5 - 76.6

Table 8 – PLUS-M™ T-scores and percentiles (persons under 35 years old)

PLUS-M T-Score	Above-knee Dysvascular (n=4)	Below-knee Dysvascular (n=5)	Above-knee Trauma (n=43)	Below-knee Trauma (n=55)	Total Sample (n=107)
Mean	-	-	52.8	59.4	56.1
25 th Percentile	-	-	47.4	52.6	48.1
50 th Percentile (median)	-	-	52.9	58.1	54.9
75 th Percentile	-	-	57.5	67.4	62.2
Standard Deviation (SD)	-	1	7.4	10.0	9.6
Range (min – max)	-	-	38.4 - 76.6	36.1 - 76.6	36.1 - 76.6

Table 9 – PLUS-M™ T-scores and percentiles (persons 36-49 years old)

PLUS-M T-Score	Above-knee Dysvascular (n=12)	Below-knee Dysvascular (n=70)	Above-knee Trauma (n=69)	Below-knee Trauma (n=92)	Total Sample (n=243)
Mean	48.1	49.6	51.1	55.9	52.3
25 th Percentile	40.8	42.9	44.4	50.0	45.6
50 th Percentile (median)	47.8	51.2	49.9	55.2	51.7
75 th Percentile	53.0	55.5	58.1	60.8	58.7
Standard Deviation (SD)	8.6	9.4	9.0	9.2	9.6
Range (min – max)	37.4 - 62.8	22.1 - 71.3	33.3 – 71.0	34.6 - 76.6	22.1 - 76.6

Table 10 – PLUS-M™ T-scores and percentiles (persons 50-64 years old)

PLUS-M T-Score	Above-knee Dysvascular (n=53)	Below-knee Dysvascular (n=179)	Above-knee Trauma (n=113)	Below-knee Trauma (n=139)	Total Sample (n=484)
Mean	40.8	47.8	49.9	55.0	49.6
25 th Percentile	34.9	42.2	45.0	48.7	42.7
50 th Percentile (median)	40.2	47.8	50.0	55.1	49.6
75 th Percentile	47.4	53.6	55.7	61.3	55.7
Standard Deviation (SD)	8.2	8.8	8.2	8.8	9.6
Range (min – max)	17.5 - 60.3	25.4 - 73.6	25.7 - 68.5	31.8 - 76.6	17.5 - 76.6

Table 11 – PLUS-M™ T-scores and percentiles (persons over 64 years old)

PLUS-M T-Score	Above-knee Dysvascular (n=51)	Below-knee Dysvascular (n=112)	Above-knee Trauma (n=41)	Below-knee Trauma (n=52)	Total Sample (n=256)
Mean	43.0	45.1	48.7	54.7	47.2
25 th Percentile	37.3	40.3	44.7	47.2	41.4
50 th Percentile (median)	42.8	44.6	49.5	54.9	47.0
75 th Percentile	49.8	49.6	52.2	60.0	52.7
Standard Deviation (SD)	8.9	8.0	5.9	9.6	9.2
Range (min – max)	24.1 - 63.7	21.9 - 66.4	33.0 - 62.8	33.9 - 76.6	21.9 - 76.6

100% Above-knee Dysvascular **Total Sample** 90% Below-knee Trauma Above-knee Trauma Below-knee Dysvascular 80% Below-knee Dysvascular Above-knee Dysvascular Total Development Sample 70% Percent of Sample Below T-Score 60% 50% 30 40% 30% Above-knee Trauma 20% Below-knee Trauma 10% MOBILITY 0% 75 80 15 20 25 55 60 65 70 85 T-Score

Figure 3 - Distribution of PLUS-M™ T-Scores by Unilateral Development Sample Group

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PLUS-M Development Sample

Bilateral Reference Sample

Bilateral reference sample characteristics are presented to facilitate interpretation of PLUS-M™ T-scores in people with bilateral amputations. These data may serve as expected or typical values for persons with <u>bilateral</u>, lower limb amputation. Data were collected in a cross-sectional study of bilateral prosthesis users. Demographics and descriptive statistics are presented for the bilateral reference sample (n=206), as well as subgroups by gender, age, etiology of amputation, and level of amputation.

Data collection methods

Data was collected from bilateral prosthetic users with different levels and etiology of limb loss. Respondents in each of six subgroups (described under "target sample") were sought for participation in the study. Participants were recruited using flyers/posters in prosthetic clinics and hospitals, advertisements in consumer magazines, and postings on list-servs, websites, and social networks.

Target sample: Lower limb prosthesis users with:

- bilateral below-knee* amputations and non-dysvascular etiology
- bilateral above-knee** amputations and non-dysvascular etiology
- below-knee* amputation, above-knee** amputation, and non-dysvascular etiology
- bilateral below-knee* amputations and dysvascular etiology
- bilateral above-knee** amputations and dysvascular etiology
- below-knee* amputation, above-knee** amputation, and dysvascular etiology

Inclusion criteria: 18+ years of age

Ability to read English

Bilateral, lower limb amputation (at or above the ankle and below the hip)

Traumatic or dysvascular etiology of amputation Regular use of a prosthesis to stand, transfer, or walk

Exclusion criteria: Amputation in one or both arms

Surveys were administered by computer (i.e., online), paper, or phone, depending on respondent's preference. Surveys included all of the questions in the PLUS-M™ item bank, as well as demographic questions, and additional questions about respondents' health, mobility, and balance.

PLUS-M™ bilateral reference sample characteristics

Bilateral reference sample data were collected from 206 unique respondents between December 2013 and August 2014. Demographics (Table 12), socioeconomic status (Table 13), health status (Table 14), and other characteristics (Table 15) of the bilateral reference sample are provided.

^{* =} includes transtibial amputation and ankle disarticulation

^{** =} includes transfemoral amputation and knee disarticulation

Table 12 - PLUS-M™ bilateral reference sample - demographics

Characteristic	Be Non-I	Below-knee B		Above-knee/ Below-knee Non-Dysvascular (n=20)		Bilateral Above-knee Non-Dysvascular (n=39)		Bilateral Below-knee Dysvascular (n=50)		Above-knee/ Below-knee Dysvascular (n=8)		Bilateral Above-knee Dysvascular (n=4)		otal mple -206)
	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Gender														
Male	56	66%	13	65%	29	74%	38	76%	4	50%	1	25%	141	68%
Female	29	34%	7	35%	10	26%	12	24%	4	50%	3	75%	65	32%
Race/Ethnicity														
Non-Hispanic White	72	85%	13	65%	31	79%	38	76%	6	75%	3	75%	163	79%
Non-Hispanic Black	5	6%	3	15%	3	8%	6	12%	1	13%	0	0%	18	9%
Hispanic	0	0%	1	5%	4	10%	4	8%	0	0%	1	25%	10	5%
Other	6	7%	3	15%	1	3%	2	4%	1	13%	0	0%	13	6%
Not reported	2	2%	0	0%	0	0%	0	0%	0	0%	0	0%	2	1%

Note: Percentages may not total 100 due to rounding

Table 13 – PLUS-M™ bilateral reference sample - socioeconomic status

Characteristic	Be Non-I	Bilateral Iow-knee Dysvascular (n=85)	(n=20)		Bilateral Above-knee Non-Dysvascular (n=39)		Bilateral Below-knee Dysvascular (n=50)		Above-knee/ Below-knee Dysvascular (n=8)		Bilateral Above-knee Dysvascular (n=4)		Total Sample (n=206)	
	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Education														
High school graduate or less	18	21%	9	45%	8	21%	19	38%	0	0%	0	0%	54	26%
Some college or tech school	32	38%	5	25%	16	41%	18	36%	4	50%	2	50%	77	37%
College graduate	21	25%	5	25%	7	18%	11	22%	1	13%	2	50%	47	23%
Advanced degree	14	16%	1	5%	8	21%	2	4%	3	38%	0	0%	28	14%
Employment														
Employed	29	34%	7	35%	17	44%	10	20%	0	0%	1	25%	64	31%
Homemaker	2	2%	1	5%	1	3%	0	0%	0	0%	1	25%	5	2%
Student	4	5%	0	0%	4	10%	0	0%	0	0%	0	0%	8	4%
Retired	18	21%	3	15%	7	18%	14	28%	3	38%	0	0%	45	22%
On disability	30	35%	9	45%	8	21%	26	52%	5	63%	2	50%	80	39%
Unemployed	2	2%	0	0%	2	5%	0	0%	0	0%	0	0%	4	2%
Individual Income														
<\$25,000	38	45%	10	50%	15	38%	28	56%	6	75%	3	75%	100	49%
\$25,000-\$39,999	12	14%	2	10%	4	10%	11	22%	0	0%	0	0%	29	14%
\$40,000-\$54,999	16	19%	0	0%	7	18%	4	8%	1	13%	0	0%	28	14%
\$55,000-\$69,999	3	4%	3	15%	2	5%	0	0%	0	0%	0	0%	8	4%
\$70,000-\$84,999	4	5%	1	5%	5	13%	2	4%	0	0%	1	25%	13	6%
\$85,000-\$99,999	3	4%	0	0%	1	3%	2	4%	0	0%	0	0%	6	3%
\$100,000+	7	8%	2	10%	3	8%	1	2%	1	13%	0	0%	14	7%

Note: Percentages may not total 100 due to rounding

Table 14 - PLUS-M™ bilateral reference sample - health status

Characteristic	Be Non-I	Bilateral Iow-knee Dysvascular (n=85)	Belo Non-Dy	ve-knee/ w-knee vsvascular =20)	Abov Non-Dy	ateral /e-knee /svascular =39)	Below Dysva	ateral w-knee ascular =50)	Belo Dysv	ve-knee/ w-knee vascular n=8)	Abov Dysv	ateral ve-knee ascular n=4)	Sa	otal mple :206)
	n	%	n	%	n	%	n	%	n	%	n	%	n	%
Health Conditions														
Asthma	6	7%	2	10%	3	8%	3	6%	0	0%	1	25%	15	7%
Arthritis	16	19%	3	15%	3	8%	8	16%	4	50%	0	0%	34	17%
Cancer	2	2%	0	0%	2	5%	1	2%	3	38%	0	0%	8	4%
Diabetes	25	29%	5	25%	1	3%	38	76%	1	13%	1	25%	71	34%
Digestive problems	4	5%	0	0%	1	3%	6	12%	0	0%	0	0%	11	5%
Heart trouble	8	9%	5	25%	0	0%	19	38%	4	50%	1	25%	37	18%
HIV or AIDS	2	2%	0	0%	0	0%	1	2%	0	0%	0	0%	3	1%
Kidney disease	8	9%	0	0%	1	3%	14	28%	0	0%	0	0%	23	11%
Liver problems	4	5%	0	0%	0	0%	3	6%	0	0%	1	25%	8	4%
Stroke	2	2%	1	5%	1	3%	5	10%	1	13%	2	50%	12	6%

Table 15 – PLUS-M™ bilateral reference sample – other characteristics

Characteristic	Bilat Below Non-Dyst (n=	-knee vascular	Belo Non-Dy	ve-knee/ ow-knee vsvascular n=20)	Bilat Above Non-Dyst (n=:	-knee vascular	Below Dysva	teral /-knee scular :50)	Above Below Dysva: (n=	-knee scular	Bilat Above Dysva: (n=	-knee scular	Tot Sam (n=2	ple
	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD
Age at time of survey (years)	52	13	47	16	40	14	60	9	59	18	41	21	51	15
Age at amputation (years)	38	19	28	18	24	16	54	10	56	15	39	21	39	20
Time since amputation (years)	14	16	19	19	16	16	6	5	4	4	2	1	12	15
Prosthesis use per day (hours)	13	4	11	4	11	5	11	4	8	5	8	6	12	4

Bilateral Reference Sample PLUS-M™ T-Scores and percentile ranks

PLUS-M™ T-scores for bilateral reference sample respondents are provided to facilitate interpretation of PLUS-M™ scores. Mean, 25th percentile, 50th percentile (median), 75th percentile, standard deviation, and range of T-scores are provided for the total bilateral sample (Table 16), males (Table 17), females (Table 18), persons under 50 years of age (Table 19), persons between 50 and 64 years of age (Table 20), and persons over 64 years of age (Table 21). The T-Scores and percentile ranks provided in Tables 16-21 are based on bilateral reference sample responses to all 44 questions in the PLUS-M™ Version 1 item bank. Bilateral reference sample statistics are not provided when subgroups are smaller than 10 individuals.

Table 16 – PLUS-M™ T-scores and percentiles (total sample)

PLUS-M T-Score	Bilateral Below-knee Non-Dysvascular (n=85)	Above-knee/ Below-knee Non-Dysvascular (n=20)	Bilateral Above-knee Non-Dysvascular (n=39)	Bilateral Below-knee Dysvascular (n=50)	Above-knee/ Below-knee Dysvascular (n=8)	Bilateral Above-knee Dysvascular (n=4)	Total Sample (n=206)
Mean	52.0	43.9	48.1	45.1	-	-	48.0
25 th Percentile	45.2	37.2	42.6	39.5	-	-	42.2
50 th Percentile (median)	52.7	46.2	47.5	44.5	-	-	47.6
75 th Percentile	57.0	51.5	53.6	51.0	-	-	54.6
Standard Deviation (SD)	9.4	9.3	9.6	9.5	-	-	10.1
Range (min – max)	17.5 - 76.6	23.4 - 55.7	29.1 - 70.7	17.5 - 67.4	-	-	17.5 - 76.6

Table 17 - PLUS-M™ T-scores and percentiles (males)

PLUS-M T-Score	Bilateral Below-knee Non-Dysvascular (n=56)	Above-knee/ Below-knee Non-Dysvascular (n=13)	Bilateral Above-knee Non-Dysvascular (n=29)	Bilateral Below-knee Dysvascular (n=38)	Above-knee/ Below-knee Dysvascular (n=4)	Bilateral Above-knee Dysvascular (n=1)	Total Sample (n=141)
Mean	52.1	46.2	49.7	45.4	-	-	48.7
25 th Percentile	44.9	42.7	43.7	38.1	-	-	42.4
50 th Percentile (median)	52.7	49.9	47.6	45.7	-	-	48.7
75 th Percentile	57.6	51.6	54.4	51.0	-	-	54.4
Standard Deviation (SD)	10.0	8.3	9.5	10.1	-	-	10.2
Range (min – max)	17.5 - 76.6	23.4 - 53	33 - 70.7	17.5 - 67.4	-	-	17.5 - 76.6

Table 18 - PLUS-M™ T-scores and percentiles (females)

PLUS-M T-Score	Bilateral Below-knee Non-Dysvascular (n=29)	Above-knee/ Below-knee Non-Dysvascular (n=7)	Bilateral Above-knee Non-Dysvascular (n=10)	Bilateral Below-knee Dysvascular (n=12)	Above-knee/ Below-knee Dysvascular (n=4)	Bilateral Above-knee Dysvascular (n=3)	Total Sample (n=65)
Mean	52.0	-	43.6	44.3	-	-	46.4
25 th Percentile	47.0	-	37.7	40.8	-	-	39.1
50 th Percentile (median)	51.5	-	45.0	43.8	-	-	46.5
75 th Percentile	57.0	-	49.5	48.7	-	-	54.7
Standard Deviation (SD)	8.3	-	8.6	7.6	-	-	9.8
Range (min – max)	35.9 - 68.8	-	29.1 - 56.2	31.4 - 55	-	-	26.6 - 68.8

Table 19 – PLUS-M™ T-scores and percentiles (persons under 50 years old)

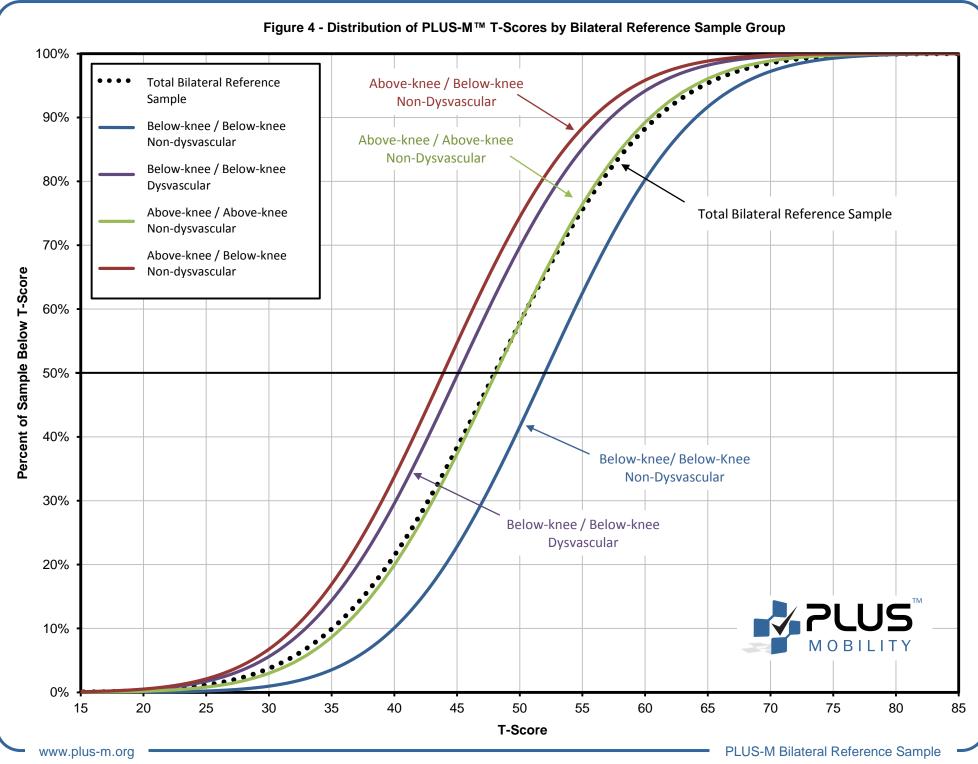
PLUS-M T-Score	Bilateral Below-knee Non-Dysvascular (n=32)	Above-knee/ Below-knee Non-Dysvascular (n=9)	Bilateral Above-knee Non-Dysvascular (n=28)	Bilateral Below-knee Dysvascular (n=7)	Above-knee/ Below-knee Dysvascular (n=2)	Bilateral Above-knee Dysvascular (n=2)	Total Sample (n=80)
Mean	53.1	-	49.8	-	-	-	49.8
25 th Percentile	45.3	-	43.4	-	-	-	43.9
50 th Percentile (median)	54.1	-	48.6	-	-	-	49.9
75 th Percentile	60.8	-	54.6	-	-	-	55.7
Standard Deviation (SD)	10.4	-	9.6	-	-	-	10.1
Range (min – max)	17.5 - 68.8	-	33 - 70.7	-	-	-	17.5 - 70.7

Table 20 - PLUS-M™ T-scores and percentiles (person 50-64 years old)

PLUS-M T-Score	Bilateral Below-knee Non-Dysvascular (n=38)	Above-knee/ Below-knee Non-Dysvascular (n=9)	Bilateral Above-knee Non-Dysvascular (n=10)	Bilateral Below-knee Dysvascular (n=30)	Above-knee/ Below-knee Dysvascular (n=3)	Bilateral Above-knee Dysvascular (n=1)	Total Sample (n=91)
Mean	51.9	-	43.5	47.8	-	-	47.8
25 th Percentile	45.1	-	36.5	42.4	-	-	42.0
50 th Percentile (median)	51.7	-	45.0	47.2	-	-	47.5
75 th Percentile	57.0	-	49.4	54.0	-	-	53.9
Standard Deviation (SD)	9.1	-	8.8	8.9	-	-	9.8
Range (min – max)	36.2 - 76.6	-	29.1 - 58.6	28.5 - 67.4	-	-	28.5 - 76.6

Table 21 - PLUS-M™ T-scores and percentiles (person over 64 years old)

PLUS-M T-Score	Bilateral Below-knee Non-Dysvascular (n=15)	Above-knee/ Below-knee Non-Dysvascular (n=2)	Bilateral Above-knee Non-Dysvascular (n=1)	Bilateral Below-knee Dysvascular (n=13)	Above-knee/ Below-knee Dysvascular (n=3)	Bilateral Above-knee Dysvascular (n=1)	Total Sample (n=35)
Mean	50.0	-	-	40.0	-	-	44.3
25 th Percentile	45.0	-	-	36.5	-	-	37.0
50 th Percentile (median)	52.2	-	-	40.5	-	-	44.5
75 th Percentile	56.4	-	-	44.6	-	-	52.1
Standard Deviation (SD)	7.9	-	-	10.0	-	-	10.0
Range (min – max)	35.9 - 64.2	-	-	17.5 - 59.5	-	-	17.5 - 64.2



Change Log

Updates to PLUS-M™ Short Forms and/or the PLUS-M™ Users Guide are made as changes are needed or as new evidence becomes available. Major updates (as indicated by a change to the PLUS-M™ version number [e.g., version 1.x to 2.x]) may affect use of PLUS-M™ instruments and/or interpretation of PLUS-M™ T-scores. Minor updates (as indicated by a decimal change to the PLUS-M™ version number) are not expected to significantly affect use of the instrument or interpretation of T-scores. Details regarding changes made to the PLUS-M™ Short Forms and Users Guide are provided below.

Version	Date	Change Description
1.0	May 5, 2013 May 30, 2014	 Original release of the PLUS-M™ Short Forms and Users Guide PLUS-M™ Short Form respondent instructions revised Instructions simplified to reduce respondent burden. Formatting changed to highlight when respondents should choose "unable to do."
1.2	December 18, 2014	 PLUS-M™ Short Form respondent instructions revised Instructions modified to describe use of a unilateral or bilateral prosthetic leg(s). PLUS-M™ Users Guide revised Target population modified to include people with unilateral or bilateral lower limb amputation. Languages modified to include German. Descriptions of the (Unilateral) Development Sample clarified. Descriptions of the Bilateral Reference Sample added. Bilateral Reference Sample characteristics and statistics added.
1.2	November 20, 2015	 PLUS-M™ Users Guide revised Minor corrections made to correct spelling errors.
1.2	March 24, 2016	PLUS-M™ Users Guide revised • Minor correction made to number of women included in the unilateral development sample.
1.2	September 16, 2022	 PLUS-M™ Users Guide revised Revisions made to amputation level terminology in the development and reference sample descriptions, tables, and graphs so as to indicate that below-knee group included people with both transtibial amputation and ankledisarticulation and above-knee group included people with both transfemoral amputation and knee disarticulation.

For more information about updates, please contact the developers (see "Questions about PLUS-M™ Short Forms," above).

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