

Reviewer ID: Emily Procter, Matthew Querée, Vanessa Noonan, Risa Fox			
Type of Outcome Measure: Pendulum Test			Total articles: 1
Author ID Year	Study Design	Setting	Population (sample size, age) and Group
Smith et al. 2000	Cross-sectional	University Rehab centre (tertiary care)	N=22 (21M, 1F) Mean age 33.4±12.5yrs (range 16-63yrs) 14 tetraplegic, 8 paraplegic 4 incomplete Mean DOI 29.8±43.2mo (range 4-172mo) ≤grade 3 muscle strength in knee extensors.
1. RELIABILITY			
Author ID	Internal Consistency	Test-retest, Inter-rater, Intra-rater	
Smith et al. 2000	No data available	<p><i>Inter-trial reliability (test-retest) = Seven pendulum tests were performed at the end of manual muscle testing.</i></p> <p>ANOVA. There were no significant differences between the 7 trials (P=.64).</p> <p>ICC and 95% confidence interval. ICC=0.92 r >0.87</p>	
2. VALIDITY			
Author ID	Validity		
Smith et al. 2000	<p><i>Average manually applied velocities during the Manual Muscle Test (MMT) were compared to muscle tone score from pendulum testing.</i></p> <p>Higher levels of muscle tone corresponded to lower applied velocities and vice versa, suggesting an inverse relationship between these two variables.</p> <p>Pearson correlation coefficient. Correlations between pendulum test score and average velocity were significant for two of the three therapists (A: r=0.223, P=.32; B: r=0.657, P<.001; C: r=0.67, P<.001). Including all three data sets gave an average correlation of 0.638 and significance level of 0.001.</p>		
3. RESPONSIVENESS – no data available			
4. FLOOR/CEILING EFFECT – no data available			
5. INTERPRETABILITY – no data available			