Reviewer ID: Jeff Tan, Marzena Zhou, Joanne Chi								
Type of Outcome Measure: Spinal Cord Injury Functional Ambulation Inventory (SCI-FAI) Total articles: 4								
Author ID Year	Study Design	Setting		Population (sample size, age) and Grou	p			
Datta et al. 2009	Observational cohort	The NeuroRecove Network (NRN), a specialized netwo of treatment cente providing standardized, activity-based therapy for patier with SCI	ery f a (ork f ers f its f its f its	N=97 (M=71; F=26) Mean Age: $38\pm17y$ Mean time since SCI = 11.9 months Incomplete SCI AIS C or D Mechanism of Injury: Motor Vehicle Accident = 34 Fall = 29 Sporting Accident = 16 Other nontrauma = 8 Medical/surgical = 6 Violence = 4				
Field-Fote et al. 2001	Methodological study testing reliability, validity and sensitivity.	University of Miar	mi F J J J J J	Reliability/Validity: N=22 (5 female, 17 male) Age: 32±13 Incomplete SCI 14 Cervical, 5 Thoracic, 3 Lumbar Ability to independently maintain stance on limb and ability to take at least 8 steps. Sensitivity: N=19 (6 female, 13 male) Age:31.7±9.4 13 tetraplegia. 6 paraplegia	ι the weight-bearing			
Lam et al. 2008	Systematic review		[; ;	Data reported in the systematic review can article – Field-Fote et al. 2001 (see popula above)	ne only from one tion characteristics			
Lemay & Nadeau 2010	Longitudinal study	An intensive rehabilitation cent in Montreal, Cana (Institut de readaptation Gingras-Lindsay Montreal)	ter r ada de - (32 SCI subjects (25 males, 7 females) mean age: 47.9± 12.8 yrs Neurological level: 15 paraplegic, 17 tetraplegic Level of injury: 17 cervical, 10 thoracic, 5 lumbar Type of injury: 21 traumatic, 11 non-traumatic Inclusion criteria: (1) Adults with SCI AIS D either of traumatic or nontraumatic etiology and (2) the ability to walk 10m independently with or without upper- extremity assistive devices. 				
1. RELIABI	1. RELIABILITY							
Author	or Internal Consistency		Test-r	retest, Inter-rater, Intra-rater				
Field-	No data available		Inter-ra	Inter-rater: Live Score(LS): ICC=0.703				

al. 2001		Videotape 1(VS1): ICC=0.800					
		Videotape 2(VS2): ICC=0.840					
		Intra-rater:					
		Comparing LS & VS1					
		Rater 1: ICC=0.903					
		Rater 2: ICC=0.956					
		Rater 3: ICC=0.942					
		Rater 4: ICC=0.850					
Z. VALIDI							
Author ID	Validity						
Field-	Correlation of the SCI-FAI with instruments	measuring the same construct as the SCI-FAI:					
Fote et	Gait Score & Walking Speed:						
al. 200 l	VS1: r=-0.742						
	VSZ: [=-U./UU Gait Score & Subject self report on walking mobility:						
	VS1: r=0.697						
	There is a moderate correlation between % change in gait score and in change lower extremity motor scores (LEMS) (r=0.58)						
Datta et	Correlation between the first principle comp	ponent of change in Berg Balance Scale (BBS) items and changes in					
al. 2009	SCI-FAI subscales:						
	SCI-FAI Gait						
	Kendall $\tau = 0.22$						
	Spearman p = 0.31						
	(P<.01)						
	SUI-FAI ASSISTIVE DEVICE Kendell $T = -0.07$ (P= 42)						
	Nervali I = $-0.07 (P = .42)$ Spearman n = $-0.10 (P = .40)$						
	Speaman $p = -0.10 (r = .40)$						
	SCI-FAI Walking Mobility						
	Kendall $\tau = 0.33$						
	Spearman p = 0.44						
Lemay &	Spearman's correlations with other walking	scales:					
Nadeau	(all P<.01)						
2010	SCI-FAI parameter						
	BBS: 0.747						
	SCI-FAI assistive devices: 0.609						
	SCI-FAI mobility:0.716 2 Minute Walk Test (2MWT): 0.805 Walking Index for Spinol Cord Injund II (MISCI II): 0.761						
	10 Meter Walk Test (10MW/T): 0 777						
	Timed Up and Go (TUG): -0.761						
	SCI-FAI assistive devices						
	BBS: 0.714 SCLEAL parameter: 0.609						
	SCI-FAI parameter: 0.609						
	2MWT: 0.740						
	WISCI II: 0.980						
	10MWT: 0.788						

	TUG: -0.802								
	<u>SCI-FAI mobility</u>								
	BBS: 0.740								
	SCI-FAI parameter: 0.716								
	SCI-FAI assistive devices: 0.690								
	2MW1: 0.688								
	10MW/T·0 756								
3. RESPONSIVENESS									
Author	Responsiveness								
ID	-								
Field-	Subjects who participated in experimental walking rehabilitation intervention, showed a 44.7% increase in mean								
Fote et al. 2001	gait score following training. This change was statistically significant (t-test, P<.001).								
	Prior to training:								
	Gait Score & LEMS: r=0.74 Post training:								
	Gait Score & LEMS: r=0.64								
4. FLOOR	CEILING EFFECT								
Author ID	Floor/ceiling effect								
Lemay &	A ceiling effect was present on the diff	ferent sections of the SCI-	FAI (parameter,	assistive devices and walking					
Nadeau	mobility: 68.8%, 34.4%, 34.4%, respectively, of subjects reaching maximal score on the scale).								
2010									
5. INTERP									
Author ID			Deman						
Lemay &		Mean (SD) score:	Range:	_					
Naueau 2010	SCI-FAI Parameter (/20)	18.5 (3.3)	7-20	-					
2010		17.8 (4.5)	14.20	-					
	SCI FALAgoistivo Dovigoo (/14)	19.0 (1.8)	14-20	-					
	SCI-FAI ASSISTIVE DEVICES (714)	11.4(2.7)	7-14	-					
		11.1 (2.4)	7-14	-					
	SCLEAL Mobility (/5)	3 7 (1 2)	2-5	-					
	Paranlegia	3.7(1.2) 3.4(1.2)	2-5	-					
	Tetranlegia	3.4(1.2)	2-5	-					
Lam et al	1 eti apregia 4 (1.1) 2-3								
2008	SEM : 0.7 points (gait parameter subscale 1 am et al. 2008)								
2000	MDC : Smallest Real Difference (SRD) = 1.9 points (13%) (gait parameter subscale. Lam et al. 2008)								
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