

<b>Reviewer ID:</b> Jeff Tan			
<b>Type of Outcome Measure:</b> Klein Bell Activities of Daily Life (ADL) Scale			<b>Total articles:</b> 2
<b>Author ID Year</b>	<b>Study Design</b>	<b>Setting</b>	<b>Population (sample size, age) and Group</b>
Lynch & Bridle 1989	Part of a follow-up study of the long-term functional effects of traumatic central spinal cord injury.	Patient's homes	N=18 Mean Age: 52 years, range 26 to 70 years
Dahlgren et al. 2007	Cross-sectional study to examine whether the Klein-Bell ADL Scale discriminates cervical SCI patients in daily activities and to explore its applicability in this group of patients, to examine the association between basic ADL and upper extremity function, and to investigate if grip ability can be discerned in the scale.	SCI Unit, Sweden.	N=55 (43M, 12F) Mean age=39 Mean time since injury=5.5 years  Inclusion criteria: traumatic SCI or acute vascular injury in the cervical level of the spinal cord
<b>1. RELIABILITY</b> – no data available			
<b>2. VALIDITY</b>			
<b>Author ID</b>	<b>Validity</b>		
Lynch & Bridle 1989	<p>Klein Bell scores &amp; actual hours of assistance required to perform ADL at home: r= -0.86</p> <p>Overall mean Jebsen-Taylor test score and overall mean Klein-Bell Scale score: ρ = -0.635, (P&lt;.01)</p> <p><u>Jebsen-Taylor &amp; Klein-Bell subscale:</u> Dressing: ρ = -0.69, (P&lt;.01) Bathing/Hygiene: ρ = -0.57, (P&lt;.01) Eating: ρ = -0.45, P&lt;.05)</p>		
Dahlgren et al. 2007	<p>Correlation between raw sum score in the K-B Scale and the Upper Extremity Motor Score (UEMS) for shoulder muscles to intrinsic muscles r=0.63 (P&lt;.01)</p> <p>Correlation between the raw sum score in the K-B Scale and the 2PD test with &lt; 10mm in number of fingers r=0.68 (P&lt;.01)</p>		
<b>3. RESPONSIVENESS</b> – no data available			
<b>4. FLOOR/CEILING EFFECT</b> – no data available			
<b>5. INTERPRETABILITY</b> – no data available			