

Name: _____



Otolaryngology
Head & Neck Surgery
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The Activities-Specific Balance Confidence (ABC) Scale

For each of the following activities, please indicate your level of self-confidence by choosing a corresponding number from the following rating scale:

0% 10 20 30 40 50 60 70 80 90 100%

“How confident are you that you will not lose your balance or become unsteady when you...”

1. Walk around the house? _____ %
2. Walk up or down stairs? _____ %
3. Bend over and pick up a slipper from the front of a closet floor? _____ %
4. Reach for a small can off a shelf at eye level? _____ %
5. Stand on your tiptoes and reach for something above your head? _____ %
6. Stand on a chair and reach for something? _____ %
7. Sweep the floor? _____ %
8. Walk outside the house to a car parked in the driveway? _____ %
9. Get into or out of a car? _____ %
10. Walk across a parking lot to the mall? _____ %
11. Walk up or down a ramp? _____ %
12. Walk in a crowded mall where people rapidly walk past you? _____ %
13. Are bumped into by people as you walk through the mall? _____ %
14. Step onto or off an escalator while you are holding onto a railing? _____ %
15. Step onto or off an escalator while holding onto parcels such that you cannot hold onto the railing? _____ %
16. Walk outside on ice sidewalks? _____ %