

Wheelchair Skills Training Program: Training Log

Manual Wheelchairs

Name of wheelchair user: _____

Caregiver assisting (if any): _____

Date of session #1: _____

#	Skills*	Sessions** (Explanation and Comments on page 2)												
		1	2	3	4	5	6	7	8	9	10			
	Date (dd/mm):													
1	Rolls forward short distance (10 m)													
2	Rolls backward short distance (5 m)													
3	Stops on command													
4	Turns in place													
5	Turns while moving forward													
6	Turns while moving backward													
7	Maneuvers sideways													
8	Picks objects from floor													
9	Relieves weight from buttocks													
10	Performs level transfers													
11	Folds and unfolds wheelchair													
12	Gets through hinged door													
13	Rolls longer distance (50 m)													
14	Ascends slight incline (5°)													
15	Descends slight incline (5°)													
16	Ascends steep incline (10°)													
17	Descends steep incline (10°)													
18	Rolls across side-slope (5°)													
19	Rolls on soft surface													
20	Gets over obstacle (5 cm)													
21	Gets over gap (15 cm)													
22	Ascends low curb (5 cm)													
23	Descends low curb (5 cm)													
24	Ascends high curb (15 cm)													
25	Descends high curb (15 cm)													
26	Performs wheelchair-ground transfers													
27	Performs stationary wheelie (30 sec)													
28	Turns in place in wheelie position													
29	Rolls forward and backward in wheelie position (2 m)													
30	Descends high curb in wheelie position													
31	Descends steep incline in wheelie position													
32	Ascends stairs													
33	Descends stairs													
34	Other:													
35	Other:													
	Trainer's initials (signatures on page 2):													
	Session duration (minutes):													

