Postural Assessment Scale for Stroke Patients (PASS)

Patient Information
Patient Name:
Age:
Gender:
Date of Assessment:
Maintaining a Posture
Give the subject instructions for each item as written below. When scoring the item, record the lowest response category that applies for each item.
Sitting without Support
Examiner: Have the subject sit on a bench/mat without back support and with feet flat on the floor.
(3) Can sit for 5 minutes without support
(2) Can sit for more than 10 seconds without support
(1) Can sit with slight support (for example; by 1 hand)
(0) Cannot sit
Standing with Support
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Examiner: Have the subject stand, providing support as needed. Evaluate only the ability to stand with or without support. Do not consider the quality of the stance.
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Examiner: Have the subject stand, providing support as needed. Evaluate only the ability to stand with or without support. Do not consider the quality of the stance. (3) Can stand with support of only 1 hand (2) Can stand with moderate support of 1person (1) Can stand with strong support of 2 people (0) Cannot stand, even with support
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Standing on Nonparetic Leg

Examiner: Have the subject stand on the nonparetic leg. Evaluate only the ability to bear weight entirely on the nonparetic leg. Do not consider how the subject accomplishes the task.

- (3) Can stand on nonparetic leg for more than 10 seconds
- (2) Can stand on nonparetic leg for more than 5 seconds
- (1) Can stand on nonparetic leg for a few seconds
- (0) Cannot stand on nonparetic leg

Standing on Paretic Leg

Examiner: Have the subject stand on the paretic leg. Evaluate only the ability to bear weight entirely on the paretic leg. Do not consider how the subject accomplishes the task.

- (3) Can stand on paretic leg for more than 01 seconds
- (2) Can stand on paretic leg for more than 5 seconds
- (1) Can stand on paretic leg for a few seconds
- (0) Cannot stand on paretic leg

Maintaining Posture Subtotal:

Changing a Posture

Supine to Paretic Side Lateral

Examiner: Begin with the subject in supine on a treatment mat. Instruct the subject to roll to the paretic side (lateral movement). Assist as necessary. Evaluate the subject's performance on the amount of help required. Do not consider the quality of performance.

- (3) Can perform without help
- (2) Can perform with little help
- (1) Can perform with much help
- (0) Cannot perform

Supine to Nonparetic Side Lateral

Examiner: Begin with the subject in supine on a treatment mat. Instruct the subject to roll to the nonparetic side (lateral movement). Assist as necessary. Evaluate the subject's performance on the amount of help required. Do not consider the quality of performance.

- (3) Can perform without help
- (2) Can perform with little help
- (1) Can perform with much help
- (0) Cannot perform

Supine to Sitting up on the Edge of the Mat Examiner: Begin with the subject in supine on a treatment mat. Instruct the subject to come to sit on the edge of the mat. Assist as necessary. Evaluate the subject's performance on the amount of help required. Do not consider the quality of performance. (3) Can perform without help (2) Can perform with little help (1) Can perform with much help (0) Cannot perform Sitting on the Edge of the Mat to Supine Examiner: Begin with the subject sitting on the edge of a treatment mat. Instruct the subject to return to supine. Assist as necessary. Evaluate the subject's performance on the amount of help required. Do not consider the quality of performance. (3) Can perform without help (2) Can perform with little help (1) Can perform with much help (0) Cannot perform **Standing Up to Sitting Down** Examiner: Begin with the subject standing by the edge of a treatment mat. Instruct the subject to sit on edge of mat without support. Assist if necessary. Evaluate the subject's performance on the amount of help required. Do not consider the quality of performance. (3) Can perform without help (2) Can perform with little help (1) Can perform with much help (0) Cannot perform Standing, Picking Up a Pencil from the Floor Examiner: Begin with the subject standing. Instruct the subject to pick up a pencil from the floor without support. Assist if necessary. Evaluate the subject's performance on the amount of help required. Do not consider the quality of performance. (3) Can perform without help (2) Can perform with little help (1) Can perform with much help (0) Cannot perform **Changing Posture Subtotal:**

Total Score:

Scoring and Interpretation

- The PASS consists of a total of 12 items, each evaluated on a scale from 0 to 3. The scoring is detailed as follows:
 - **0 points** indicate the patient is unable to perform the task.
 - 1 point shows the patient can perform the task with major assistance.
 - 2 points are given when the patient can perform the task with minimal assistance.
 - 3 points reflect complete independence in performing the task, with no assistance required.
- The total score is calculated by summing the scores from each component, resulting in a maximum possible score of 36.
- Higher scores indicate better balance and functional ability.
- · Here's a general interpretation of PASS scores:
 - **0-12 points:** Significant postural impairment, requiring assistance with most daily activities.
 - 13-24 points: Moderate postural impairment, may require assistance with some daily activities.
 - 25-36 points: Good postural control, likely independent in daily activities.

Additional Considerations

- PASS is a quick assessment tool and should be used in conjunction with other evaluations to get a more comprehensive picture of a patient's functional abilities.
- Cut-off scores for predicting specific outcomes (e.g., walking ability at discharge) have been established in some studies. However, these should be interpreted with caution and in the context of the individual patient.

Adapted from

Benaim, C., Pérennou, D. A., Villy, J., Rousseaux, M., & Pelissier, J. Y. (1999). Validation of a standardized assessment of postural control in stroke patients: the Postural Assessment Scale for Stroke Patients (PASS). *Stroke*, *30*(9), 1862–1868. https://doi.org/10.1161/01.str.30.9.1862