ATS— Outcome Forms

ATS allows you to create and utilize patient outcome forms. This form is built utilizing the <u>Range</u> questions. This document will walk you through setting up the basics.

Begin as always, by creating the form in the Athlete Form Name Maintenance area.

Admin Windows Help				
🚜 Site Info				
🧞 Add/Update Teams & Organizations	•			
💼 Users	•			
🍠 Maintenance	•	Dropdown/Popup Lists	•	
😸 Dashboard Statistics		Available Docs/Forms		
Athlete Security	•	Note Types & Templates	<u> </u>	<u>_</u>
🕝 Drug Testing	•	Athlete Forms	•	Update Athlete Forms
Athlete Utilities	•	Staff Forms	•	Athlete Forms - Update Structure
 Injury Utilities 	+	Medical Staff/Coaches Forms		Conv Athlete Form
Scheduling Utilities	+	Protocols	•	Athlete Form Name Maintenance

Add the form entry like you would any other form. When specifically wanting to categorize and use the Outcome dataminer, be sure to check the Outcome Box.

You can add new forms, if there is an existing form in the library, you are also able to copy the form.

🔄 Athlete Form Maintenance												23
Form Name	Abbrev	Active	Sort	Ath Sign	Parent Sign	Vis Parent	Vis Athlete	Days	Active From	Active To	Last Used	
Region Name(s)	Organization(s)		Team I	Name(s)			Gender(s)	Athlete	Year(s)	< Age	Outcome	
											\sim	

After adding or copying the form, you can check to make sure the questions are required, or begin building your own. Again, use the range questions to build the form. 0 of 0 Form Name: ~ 🕀 ◄ Question # ► Sub-Section #: Section #: Question #: Parent #: **Question is Active? Answer Required?** Section Name: Question Definition Question Header Secondary Question Options Question Gender **Question Type Range Question** Note/Info/Title Highlight Yes on report Bottom: Top:

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Once you get the form created and finished to your liking, you can have your patient/athletes fill them out. Using the formula/range style questions you are able to have the final question auto calculate the total for you.

Q 21: Carrying a small suitcase with your affected limb * A 21: 4 0 to 4 Q 22: Minimum Level of Detectable Change (90% Confidence): 9 points SCORE:/80 A 22: 76
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A 22: 76
23: Source: Stratford PW, Binkley, JM, Stratford DM (2001): Development and initial validation of the upper extremity functional index. Physiotherapy Canada. 53(4):259-267.
🚯 ATS Data Miner
1 - Choose the export area
Outcome Research - Athletes
2 - Select the data to be exported Select All Fields Clear Selections
✓ SecondaryQuestion
QuestionOrder
FILE HOME INSERT PAGE LAYOUT FORMULAS DATA REVIEW VIEW DEVELOPER
$\begin{array}{c c c c c c c c c c c c c c c c c c c $
Paste \checkmark Format Painter B $I \sqcup \checkmark$ $\square \checkmark$ $\triangle \checkmark$ $\blacksquare \equiv \equiv \equiv \Subset \blacksquare$ Merge & Center \checkmark
Clipboard 🕞 Font 🖓 Alignment 🖓
H27 $\overline{}$: $\times \sqrt{f_x}$
1 Question SecondaryQuestion QuestionCRangeAn FormName FormulaQuestion
2 2 Today, do you or 2 Upper Extremity Fur FALSE
3 3 Any of your usual wor 3 4 Upper Extremity Fur FALSE
4 4 Your usual hobbies, re 4 3 Upper Extremity Fur FALSE
6 6 Lifting a bag of grocer 6 4 Upper Extremity Full FALSE
7 7 Grooming your hair 7 4 Upper Extremity Fur FALSE
8 8 Pushing up on your ha 8 4 Upper Extremity Fui FALSE
9 9 9 Preparing food (eg pe 9 4 Upper Extremity Fur FALSE
11 11 Vacuuming, sweeping 11 4 Upper Extremity Fur FALSE
12 12 Dressing 12 4 Upper Extremity Fur FALSE
13 13 Doing up buttons 13 4 Upper Extremity Fur FALSE
14 14 Using tools or applian 14 4 Upper Extremity Fur FALSE
15 15 4 Upper Extremity Full FALSE 16 16 Cleaning 16 4 Upper Extremity Full FALSE
17 17 Tying or lacing shoes 17 4 Upper Extremity Fur FALSE
18 18 Sleeping 18 3 Upper Extremity Ful FALSE
19 19 Laundering clothes (e 19 4 Upper Extremity Fur FALSE 20 20 20 20 20 20 20
20 20 20 4 Upper Extremity Full FALSE 21 21 Throwing a ball 21 2 Upper Extremity Full FALSE
22 22 Carrying a small suitce 22 4 Upper Extremity Full FALSE
23 23 Minimum Level of De 23 76 Upper Extremity Fur TRUE
24 24 Source: Stratford PW, 24 Upper Extremity Fur FALSE

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You could also utilize the athlete form reports (section 15) of the reports to evaluate the answers.

	Joe Tec	h			
	Upper Extremity Functional	Index (UEFI) Forn	1		
	For: Davis, Crash Created	: 07/21/2021 9:28 a	m		
aud					
feam(s) Men Baseball					
Extreme difficulty or unable to per Duite a bit of difficulty = 1	form activity = 0				
Moderate difficulty = 2					
A little bit of difficulty = 3 No difficulty = 4					
Today, do you or would you hav	e any difficulty at all with:				
Any of your usual work, house	vork, or school activities	0	to	4	4
Your usual hobbies, re creation	al or sporting activities	0	to	4	;
Lifting a bag of groceries to wa	ist level	0	to	4	4
Lifting a bag of groceries above	e your head	0	to	4	4
Grooming your hair		0	to	4	4
Pushing up on your hands (eg	from bathtub or chair)	0	to	4	4
Preparing food (eg peeling, cut	ing)	0	to	4	4
Driving		0	to	4	4
Vacuuming, sweeping or raking]	0	to	4	4
Dressing		0	to	4	4
Doing up buttons		0	to	4	4
Using tools or appliances		0	to	4	4
Opening doors		0	to	4	4
Cleaning		0	to	4	4
Tying or lacing shoes		0	to	4	4
Sleeping		0	to	4	:
Laundering clothes (eg washing	g, ironing, folding)	0	to	4	4
Opening a jar		0	to	4	4
Throwing a ball		0	to	4	1
Carrying a small suitcase with	your affected limb	0	to	4	
Minimum Level of Detectable C	Change (90% Confidence): 9 points SCOF	RE:			76

These forms can be available to the patient/athlete. Or you can utilize the individual form send capability that ATS offers to send them on a case by case basis. For more information on that, please review the help doc.