

# Hand Function Test Record Sheet

Subject's Name \_\_\_\_\_ Dominant Hand \_\_\_\_\_

Administrator's Name \_\_\_\_\_

	<b>Test One</b> Date Administered _____		<b>Test Two</b> Date Administered _____	
	<b>Non-Dominant Hand</b>	<b>Dominant Hand</b>	<b>Non-Dominant Hand</b>	<b>Dominant Hand</b>
<b>Writing</b>				
<b>Simulated Page Turning</b>				
<b>Lifting Small, Common Objects</b>				
<b>Simulated Feeding</b>				
<b>Stacking Checkers</b>				
<b>Lifting Large, Light Objects</b>				
<b>Lifting Large, Heavy Objects</b>				