This questionnaire will help us in evaluating the performance of the prototype prosthetic foot Shape&Roll Talon you agreed to wear over the last five weeks. Please, evaluate your experience. Your contribution is important to us and your assistance is greatly appreciated!

Please circle one (1) appropriate answer that corresponds best with your experiences and observations

A. How often did you interchange your prosthetic feet over the last five weeks?
   (1) Twice a day
   (2) Once a day
   (3) Three times per week
   (4) Twice per week
   (5) Once per week
   (6) Never
   (7) None of the above. Please specify: __________________________________________

B. While walking outside, I had to be careful while using the Shape&Roll Talon foot.
   (1) Never
   (2) Only while walking a long distance or over uneven ground and such.
   (3) Usually
   (4) Always
   (5) I never walk outside

D. With the Shape&Roll Talon, I use a cane/stick/crutch or other support or I walk supported by somebody else while walking outside.
   (1) Never
   (2) Sometimes
   (3) Usually
   (4) I never walk outside

E. Which of your newly chosen heel heights did you like the most?

________________________________________________________________________

F. Over the last four weeks, for how long did you wear your favourite heel height?
   (1) All the time (100%)
   (2) Most of the time (67%)
   (3) As much as possible (33%)
   (4) Never (0%)

G. Compared with my previous foot, the Shape&Roll Talon rolls over
   (1) Very naturally and smoothly
   (2) As if I were walking downhill
   (3) As if I were walking uphill
   (4) None of the above. Please, specify:__________________________________________
H. When walking inside, I use a cane/stick/crutch or support myself on pieces of furniture or some other support when using the Shape&Roll Talon foot.
   (1) Never
   (2) Sometimes
   (3) Usually
   (4) Always

I. Compared with my previous foot, the Shape&Roll Talon made my prosthesis
   (1) Much lighter
   (2) Lighter
   (3) No noticeable weight change
   (4) Heavier
   (5) Much heavier

J. How do you classify your walking style compared to a person without an amputation?
   (1) Perfect: No difference
   (2) Excellent: Slight deviations
   (3) Good: Moderate deviations
   (4) Less: Big deviations
   (5) Bad: Very big deviations

K. Do you think that your walking style has improved since you have been using the Shape&Roll Talon?
   (1) Large improvement
   (2) Moderate improvement
   (3) No difference
   (4) Worse than before
   (5) A lot worse than before

L. Since having the Shape&Roll Talon, have you had any comments from other people (i.e. family, friends etc.) about the way you walk compared to your previous foot?
   (1) Very positive comments
   (2) Favourable comments
   (3) No comments
   (4) Unfavourable comments
   (5) Very negative comments

What general comments do you have about the new Shape&Roll Talon? We welcome any suggestions, recommendations, comments and thoughts!

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Thank you for your participation!

Test Code ____________________      Date __________