

*\*This assessment review was compiled by our students and is intended to be used as a guide in assisting clinicians. We encourage you to review the evaluations and assessments for yourself to guarantee the most accurate and updated information.*

## I. General Information

**Title of the test:** Purdue Pegboard

**Author:** Joseph Tiffin, Ph.D., (1948), an Industrial Psychologist at Purdue University.

**Publisher:** Lafayette Instrument  
www.lafayetteinstrument.com

**Time required to administer:** The original Purdue Pegboard Test prescribed testing time for 90 seconds, 30 seconds for each condition (it has since been modified by several different people on the test procedure).

**Cost of the Test:** \$110.00 from Lafayette



## II. Description of Test

**Type/Purpose of Test:** Measures gross movement of hands, fingers, gross motor, coordination, and finger dexterity needed to assemble a task. Can be used to obtain a baseline of information on a client as far as their fine motor skills. It can also be used to determine individual's competence in completing a task that requires manual dexterity for a job or a pre-employment screening tool for dexterity.

([http://www.lafayetteevaluation.com/product\\_detail](http://www.lafayetteevaluation.com/product_detail))

**Population:** People with fine motor disabilities/deficits/injury, brain injury, learning disabilities, and dyslexia. (Children, adults, older adults)

**Focus of measurement:**

Organic systems  Abilities  Participation/life habits  Environmental Factors

## III. Practical Administration

**Ease of Administration:** ~Easy

**Clarity of Directions:** There are specific instructions in the manual. It starts out with simple instructions and gradually becomes more detailed. The instructions give you permission to administer further instruction if needed.

**Scoring Procedures:**

1. Read the instruction in the manual to your client before they perform each task. This is a timed test to determine accuracy and speed.
2. Right hand – client picks up pin one at a time with right hand from the right-handed cup. They place the pin at the top hole. Continue to place each pin in the right-handed row.
3. Take out all the pins and have them repeat the previous step. This time you time them by giving them 30 seconds. When 30 seconds is over you tell them to stop.
4. Count pins and record.
5. Have them do the same previous steps but with the left hand. Count the pins and record.
6. Have client assemble the pins, collars, and washers with both hands (time them 1 minute).
7. Count the number of parts assembled and record the assembled score (# of parts assembled in one minute)
8. SCORING: The scores is the number of right handed pins + left handed pins + assembled with both hands.

- a. If all 8 parts are assembled the score is 32. (Each assembly consists of 4 parts)
- b. If six complete assemblies are made, but the pin and washer of the seventh are properly placed you add each part separately (i.e. 24 plus 2, or 26 total).
- c. Combine R + L + Assembled score = total score
- d. Record the scores on the score sheet – Use the quick reference means (a normative score). Can use the Verbal Scale, Standard Scale or Percentile Scale

### Examiner Qualification & Training

The examiner should be thoroughly familiar with the test and should be capable of demonstrating various tasks.

### IV. Technical Considerations

**Standardization:**  Norms  Criterion Referenced  Other \_\_\_\_\_

**Reliability:** .82 to .91 (According to Spearman-Brown)

**Validity:** It is recommended that the Purdue Pegboard Tests be validated locally (relating test scores to actual performance on a specific job for which the test will be used as a selection tool).

**Manual:**  Excellent  Adequate  Poor

### What is (are) the setting/s that you would anticipate using this assessment?

Can be used in, but not limited to: work-place settings, clinical settings, pediatrics clinics, schools, inpatient/outpatient rehabilitations, private practice, etc.

### Summary of strengths and weaknesses

**Weakness:** The test is outdated. Refers to learning disabilities/brain injuries as “brain-damaged”. Validity values are not stated in the manual, except by giving two examples of studies done with the pegboard addressing validity with different types of populations and deficits done by other researchers. Still no validity values are given.

**Strength:** Can be used for a variety of deficits/disabilities and can be adapted depending upon assessment needs. Instructions on administering test are easy to understand and can be adapted/modified if needed for client.