Upper Extremity Orthotic Assessment Form

Date		DX	
Patient Name		Height	
DOB		Weight	
Gender			

Past Treatments / Interventions _____

Clinical Goals _____

Orthotist's Name _____

Therapist's Name _____

Physician's Name _____

Assessment Completed by _____

Strength, Grade 5-0 (see reverse)					
	Left	Right		Left	Right
Elbow Flexors			Elbow Extensors		
Wrist Flexors			Wrist Extensors		
Finger Flexors			Finger Extensors		
Thumb Flexors			Thumb Extensors		

Range of Motion (see reverse)				
	R1, AOC with velocity		R2, slow hard stretch	
	Left	Right	Left	Right
Elbow Extension				
Elbow Flexion				
Forearm Supination				
Forearm Pronation				
Wrist Extension				
Wrist Flexion				
Finger Extension				
Finger Flexion				

Sensation (see reverse)					
	Left	Right		Left	Right
Wrist	Y / Impaired / N	Y / Impaired / N	Finger	Y / Impaired / N	Y / Impaired / N
Thumb	Y / Impaired / N	Y / Impaired / N			

Motor Control Can movement be isolated at these joints?		
	Left	Right
Shoulder	Good / Fair / Poor	Good / Fair / Poor
Elbow	Good / Fair / Poor	Good / Fair / Poor
Wrist	Good / Fair / Poor	Good / Fair / Poor
Finger	Good / Fair / Poor	Good / Fair / Poor
Thumb	Good / Fair / Poor	Good / Fair / Poor

Functional Classification of Hand - please choose one	
Left	Right
Hand not used in task	Hand not used in task
Used as paper weight only	Used as paper weight only
Used for passive grasp-objects placed in hand	Used for passive grasp-objects placed in hand
Used actively for grasp and held weakly	Used actively for grasp and held weakly
Used actively for grasp and stabilized well	Used actively for grasp and stabilized well

Perform bimanual activities easily and occasionally use hand spontaneously	Perform bimanual activities easily and occasionally use hand spontaneously
Approaching normal, good use in functional skill	Approaching normal, good use in functional skill

Functional use of Forearm/Hand not Used - please choose one	
Left	Right
Arm not used in task	Arm not used in task
Used as paper weight only	Used as paper weight only
Used actively for bimanual task and held weakly against forearm; weak flexion and extension of elbow	Used actively for bimanual task and held weakly against forearm; weak flexion and extension of elbow
Used actively for bimanual task and stabilized well; active flexion and extension of elbow	Used actively for bimanual task and stabilized well; active flexion and extension of elbow

Resting Position of Arm/Wrist/Fingers/Thumb in Sitting or Standing - please choose one	
Left	Right
Shoulder - forward / retracted / neutral	Shoulder - forward / retracted / neutral
Humerus - external / neutral / internal	Humerus - external / neutral / internal
Forearm - pronation / neutral / supination	Forearm - pronation / neutral / supination
Wrist - flexion / extension / neutral / ulnar deviation / radial	Wrist - flexion / extension / neutral / ulnar deviation / radial
Fingers - relaxed / flex / extended	Fingers - relaxed / flex / extended
Thumb - relaxed / flex / extended	Thumb - relaxed / flex / extended

Strength

Strength can be assessed through MMT of elbow flexors and extensors, wrist flexors and extensors, and finger flexors and extensors to the extent feasible.

Grade 5 Normal - Patient can hold the position against maximum resistance throughout complete ROM

Grade 4 Good - Patient can hold the position against strong to moderage resistance, has full ROM

Grade 3 Fair - Patient can tolerate no resistance, but can perform the movement through the full ROM

Grade 2 Poor - Patient has all or partial ROM in the gravity eliminated position

Grade 1 Trace - The muscle/muscles can be palpated while the patient is performing the action in the gravity eliminated position

Grade 0 Zero - No contractile activity can be felt in the gravity eliminated position

Range of Motion

Dynamic Range - R1 (AOC with velocity) - May also be referred to as "Initial end range", "First catch", "Angle of catch", or Tardieu V3; point at which resistance is first observed (or sometimes even spasm or clonus) when applying a very quick stretch to a patient's limb

Static Range - R2 (slow hard stretch) - Refers to maximum end range with torque applied or Tardieu V1; when applying slow velocity and high external force and holding for 5+ seconds until patient "lets go." If patient is actively (volitionally) resisting, measurement cannot be taken

Please note: Please assess R1 and R2 in and out of adverse synergy pattern. CP adverse synergy pattern is elbow, wrist, and finger flexion with forearm pronation.

Sensation

Standard test should be used to grade sensation; please note, extremely poor sensory input does not allow the patient to feel the program assisted movements adequately.