

KNGF-Guidelines Stroke

Diagnostic process

[checklist]

1. Referral and intake

General patient characteristics*

- Name of patient
- Date of birth
- Gender
- Diagnosis? Consider Oxfordshire Community Stroke Project classification**
- Lateralization of stroke
- Type of stroke
- Date of onset of stroke
- Recurrent stroke

Other data*

- Admission location
- Admission date
- Treating physical therapist
- Referring physician and referral date
- Referral diagnosis / diagnostic data
- Possible consult request
- Patient's insurance data
- Reason for admission (intramural)
- Other disciplines consulted

2. History-taking

General data*

- Patient's or partner's demand
- Experienced problems with regard to functioning
- Preferred hand of the patient
- Patient's profession
- Patient's living situation
- Present adjustments or aids

Other data

- Data of patient's partner: consider Carer Strain Index
- Pre-existent functioning
- Transportation before the onset of stroke
- Relevant medical history
- Relevant psychiatric history
- Medicine use
- Previous physical therapeutic care
- Patient's expectations
- Tentative conclusion(s)

3a. Assessment

- Findings of the physical therapist / results of assessment
- Which diagnostic interventions?

* Information may be copied from the patient's medical dossier or another team member's discipline dossier or may be obtained from the patient's partner.

** Physical therapists have to be acquainted with the measuring instrument mentioned; another team member usually performs the test.

3b. Diagnostic interventions

Consider the advised measuring instruments (for overview: see Clinimetrics)

Level of awareness

- Is the patient approachable? Consider Glasgow Coma Scale.**

General impression

- Is the patient cooperative, motivated and can he tolerate a certain load?

Communication and neuropsychological function impairments

- Are there any communication problems?
- Are there any orientation impairments as to place and person? (Consider Mini Mental State Examination.**)
- Are there any problems with memory or concentration?
- Is there any visual or somatosensory neglect? (Consider Line Bisection Test**, O-search-Test**)

Brain nerves

- Are there impairments in functions taken care of by the brain nerves? (e.g. hemianopsia, speech problems, swallowing problems)

Complications

- Are there any pulmonary or cardiovascular problems?
- Is there a deep venous thrombosis, decubitus or hand edema?

Mobility

- Is there a reduced passive range of motion of upper and/or lower paretic extremities?

Somatosensory

- Are there any changes in vital or gnostic sensibility (in the sense of posture and movement)?

Muscle tonus

- Is there any stiffness during passive movements?

Severity of paresis

- Do the movements occur within synergistic-dependent patterns?
- Are any isolated movements possible beyond the synergistic-dependent patterns?

Coordination

- Are there any coordination problems?

Pain

- Is there a general pain syndrome?
- Is there any hemiplegic shoulder pain?

Muscle strength

- Are there any changes in muscle strength?

Maintain posture

- Are there any problems with lying?
- Are there any balance problems during sitting?
- Are there any balance problems during standing?
- Are there any problems with rolling over to the paretic side?
- Are there any problems with rolling over to the non-paretic side?
- Are there any problems with transfer from lying to sitting and vice versa?
- Are there any problems with transfer from sitting to sitting?
- Are there any problems with transfer from sitting to standing and vice versa?

Carrying, moving and manipulating

- Are there any problems with lifting and taking/carrying?
- Are there any problems with the use of the paretic arm/hand?

Moving

- Are there any problems with moving independently in a wheelchair?
- Are there any problems with walking inside or outside the house?

Use of aids

- Are the (walking) aids properly used?

Use of transportation

- Are there any problems with independently riding a bike?
- Can public transport be used?

ADL

- Are there any problems with basic or special ADL-abilities?

4. Analysis

Physical therapeutic diagnosis/conclusion?

- Indication for physical therapy? Yes/no
- Favorable prognostic determinants? (See physical therapeutic process)
- Report to the referring physician.

5. Treatment plan

Intended end result / main goal?

- Results in between?
- Planned interventions?
- Goals discussed with patient?
- Intended multidisciplinary goal?
- Multidisciplinary agreements?
- Expected treatment duration, number of sessions per week and planned session duration?
- Planned starting date of treatment?
- Planned treatment location?
- Planned evaluation moment?

6. Treatment

See Therapeutic Process

7. Evaluation

Realization of treatment goals?

The use of measuring instruments: Consider the advised measuring instruments (for overview: see Clinimetrics).

- Systematic measuring (monitoring):
- at the end of the first week after the onset of stroke
 - in week of admission
 - in week of discharge
 - prior to a multidisciplinary team meeting
 - 3 months after the onset of stroke
 - 6 months after the onset of stroke
 - after 6 months, depending on the determined functional goals

Adjustment of treatment goals?

Yes: go back.

No: continue.

8. End of treatment

- Date and reason for discharge/ending treatment?
- Agreements on aftercare?
- Report to the referring physician?

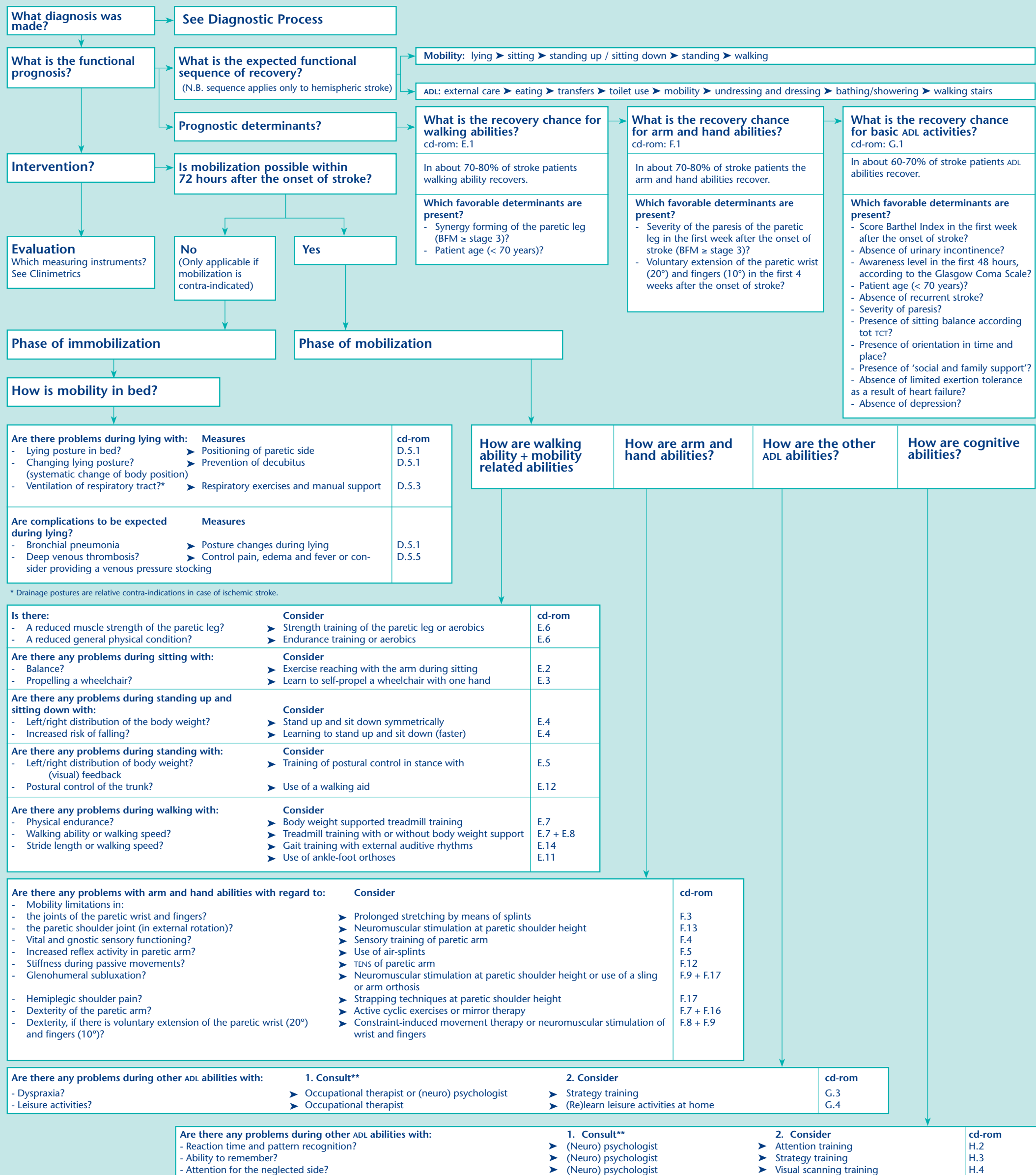
Clinimetrics



Which measuring instruments are advised?

Advised measuring instruments	During intake?	In case of immobilization?	In case of mobilization?			How are the abilities of arm and hand?	How are the basic ADL abilities?	How are cognitive functions?
	How to evaluate during intake?	How to evaluate during the phase of immobilization?	Is the patient able to sit?	Is the patient able to stand?	Is the patient able to walk?			
Basic measuring instruments	General (pre-existent) assessment data Intake/history-taking cd-rom K.1	Consider Motricity Index cd-rom K.2.1 Trunk Control Test cd-rom K.2.2	Consider Motricity Index leg cd-rom K.2.1 Trunk Control Test cd-rom K.2.2	Consider Motricity Index leg cd-rom K.2.1 Berg Balance Scale cd-rom K.2.3	Consider Functional Ambulation Categories cd-rom K.2.4 (Comfortable) Ten-meter walk test cd-rom K.2.5	Consider Motricity Index-arm cd-rom K.2.1 Frenchay Arm Test cd-rom K.2.6	Consult and attune the treatment with ergo therapist cd-rom G.2 Barthel Index cd-rom K.2.7	Consult and attune treatment with (neuro)psychologist or occupational therapist cd-rom H.1
Recommended measuring instruments	Modified Rankin Scale cd-rom K.3.1 Frenchay Activities Index cd-rom K.6.2	Neutral-0-Method cd-rom K.3.2 Modified Ashworth Scale (knee + elbow) cd-rom K.3.3 Tests Brain nerves cd-rom K.3.4 Brunnstrom Fugl-Meyer Assessment (leg + arm) cd-rom K.3.5 Nottingham Sensory Assessment cd-rom K.5.1 Numeric Pain Rating Scale cd-rom K.5.2 Frenchay Activities Index cd-rom K.6.2	Modified Ashworth Scale (knee) cd-rom K.3.3 Brunnstrom Fugl-Meyer Assessment (oe) cd-rom K.3.5 Trunk Impairment Scale cd-rom K.4.1	Timed Balance Test cd-rom K.4.4	Falls Efficacy Scale cd-rom K.4.2 Timed Up&Go-test cd-rom K.4.3 Rivermead Mobility Index cd-rom K.4.5 Six-minute walk test cd-rom K.4.6	Modified Ashworth Scale (elbow) cd-rom K.3.3 Brunnstrom Fugl-Meyer Assessment (BE) cd-rom K.3.5 Nottingham Sensory Assessment cd-rom K.5.1 Numeric Pain Rating Scale cd-rom K.5.2 Water displacement volumetry cd-rom K.5.3 Action Research Arm Test cd-rom K.5.4 Nine Hole Peg Test cd-rom K.5.5	Nottingham Extended ADL Index cd-rom K.5.1 Frenchay Activities Index cd-rom K.6.2	

Therapeutic Process



** If necessary, other team members can also be involved in these interventions.