

COMPOSITE SPASTICITY INDEX
MOTOR CONTROL IN REHABILITATION LABORATORY
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NAME: _____ TODAY`S DATE: d/m/y_____

DATE OF BIRTH (d/m/y) _____ AGE: ____ DATE OF INJURY _____

DESCRIPTION OF INJURY AND TREATMENT HISTORY:

MEDICATIONS:

RANGE OF MOTION: WRIST: _____ ELBOW _____

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EVALUATION

TENDON JERK (BICEPS)

- 0 No response
- 1 Normal response
- 2 Mildly hyperactive response
- 3 Moderately hyperactive response
- 4 Maximally hyperactive response

RESISTANCE TO FULL RANGE PASSIVE JOINT DISPLACEMENT (e.g., elbow extension)

* performed at moderate speed (> 100 deg/s)

- 0 No resistance (hypotonic)
- 2 Normal resistance
- 4 Mildly increased resistance
- 6 Moderately increased resistance
- 8 Maximally increased resistance

CLONUS (wrist or ankle)

- 1 Clonus not elicited
- 2 1 – 3 beats of clonus elicited
- 3 3 – 10 beats of clonus elicited
- 4 Sustained clonus

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COMPOSITE SPASTICITY SCORE _____ / 16