# **Neurological Assessment Tools**

Glasgow Coma Scale			
Eye Opening	Verbal Response	Motor Response	Score
		Obeys	6
	Oriented	Localizes	5
Spontaneously	Confused.	Withdraws	4
To sound	Inappropriate Uses words	Abnormal Flexion	3
To pressure	Makes sounds (without word)	Abnormal Extension	2
No eye opening	No vocalization	No Movement	1
/4	/5	/6	/15

Motor Scoring Scale		
5	Able to overcome strong resistance (normal strength)	
4	Able to overcome mild resistance (mild weakness)	
3	Supports limb against gravity but not resistance	
2	Moves but not against gravity	
1	Muscle flicker but no movement	
0	No muscle movement	
/5	Score	

Revised: January 29, 2020 Reviewed: January 16, 2025

#### **Deep Tendon Reflexes**

- Motor weakness associated with increased tone and deep tendon reflexes (3 or 4+), and/or with clonus suggest an upper motor neuron cause for the weakness.
- Motor weakness associated with flaccid paralysis and decreased deep tendon reflexes (< 2+) suggest lower motor neuron cause for the weakness.



Biceps Brachii Tendon C5, C6



Triceps Tendon C7, C6



Plantar Reflex (Babinski)



Brachioradialis Tendon C6, C5



Clonus: Oscillations between flexion and extension



Quadriceps Tendon (knee jerk) L4, L3, L2

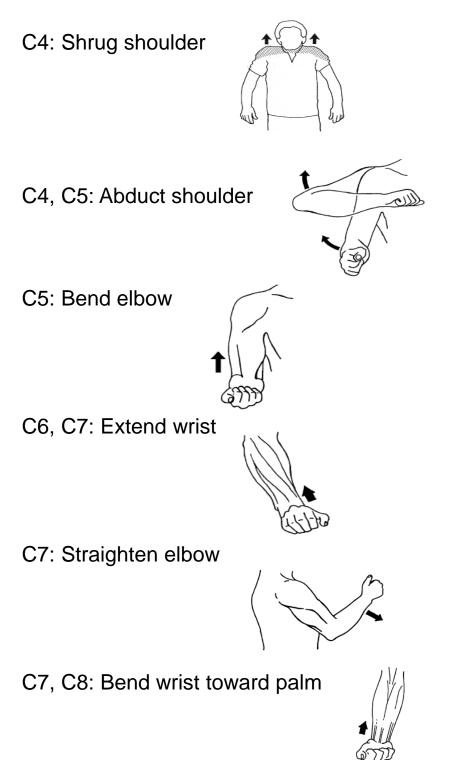


Achilles Tendon (ankle jerk) S1



# **Motor Assessment/Spinal Cord Testing**

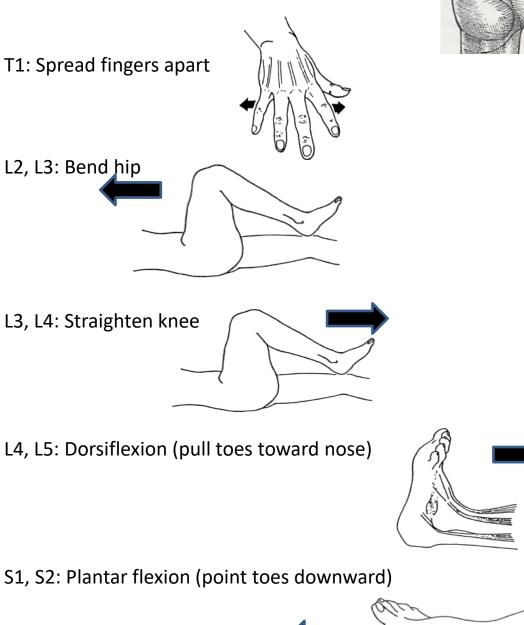
### Level of Function:



# **Motor Assessment/Spinal Cord Testing**

### Level of Function:

C8: Bend fingers toward palm at first digit joint





#### **Sensory Assessment/Spinal Cord Testing**

Test sensation twice, once for pin and once for light touch . Use a whisp of tissue for light touch and blunt end needle for pain/pin. Record the highest level of sensation using the dermatome chart below.

