

DRAFT Movement Screen

Provide feedback about this movement screen by June 1, 2019, at www.apta.org/MovementSystem/Feedback

The movement screen is a **tool** designed to detect movement impairments observed during functional task/activities that will help therapists decide which additional tests and measures to include in the patient and client examination. The screen is designed to be used for all populations and in all settings, with the recommendation that, where possible, all tasks are performed so as not to miss relevant issues in systems/areas that you would not automatically think to assess. Since this is a screen and **not** a comprehensive examination, standardized instructions are not included as to how to perform these tasks. When observing the movement the following may be used as a guide:

Quality of Movement to Observe	Description
Speed of movement	Time to complete the task
Amount of movement	Amplitude, Excursion, ROM of movement required to complete the activity.
Symmetry of movement	There may be natural asymmetries in a task.
Control	Smoothness, coordination, stability, sequencing, timing initiation
Symptom Alteration	Guarded, SOB, Pain alteration

Activity/Task	Instructions	Impaired (yes/no)	Not Impaired (yes/no)	Unable to Perform (check)	Symptom Provocation (Activities or postures that aggravate or relieve symptoms) (check if present)
Head movement	In either sitting or standing. 1. Extension - Look up to ceiling/sky 2. Flexion - Look down to floor/ground 3. Rotation - Look over your shoulder (left, right) 4. Side Bending/Lateral Flexion - Bring your ear to your shoulder (left, right)				
Changing and maintaining body position:					
• Rolling	Have child/individual from supine position do the following: - Roll to the right - Roll to the left - Roll to prone				

<ul style="list-style-type: none"> • Lying to sit to lying 	<p>Patient in supine - ask the patient to rise to sitting with feet dangling off mat/bed. Ask the patient to return to supine from the dangling position.</p>				
<ul style="list-style-type: none"> • Sit to stand to sit 	<p>From a sitting position, rise to stand, return to sitting</p>				
<ul style="list-style-type: none"> • Squatting 	<p>Pretend to pick up a light object from the floor.</p>				
Mobility:					
<ul style="list-style-type: none"> • Crawling/Walking/Running/Wheelchair 	<p>Crawling: move forward on your hands and knees Walking: walk at a comfortable pace Running: run at a comfortable pace on the treadmill (or over ground) Wheelchair: propel yourself at a comfortable pace</p>				
<ul style="list-style-type: none"> • Step up and step down 	<p>Step up and down onto a single step, leading with your right foot. Step up and down onto a single step, leading with your left foot.</p>				
Hand and Arm Use:					
<ul style="list-style-type: none"> • Reaching 	<p>In a sitting or standing position: 1. Raise both arms over your head as if you were reaching for an object on a high shelf. 2. Put both hands behind your head. 3. Put both hands behind your back.</p>				
<ul style="list-style-type: none"> • Grasping 	<p>Hold and release object. This can be any object (including therapist's fingers). Perform with both hands.</p>				
<ul style="list-style-type: none"> • Manipulating 	<p>Using one hand, pick up an object and manipulate it. (e.g. pick up a pencil/crayon/toy and move it to right). Perform with both hands.</p>				

Summary: Based on the history and screen, which systems require additional examination – check all that apply:

System	Requires additional examination (check all that apply)
Musculoskeletal	
Neuromuscular	
Cardiovascular/pulmonary	
Integumentary	

DRAFT