

ASSESSMENT AND INTERVENTIONS IN MS REHABILITATION

INTRODUCTION

The chart below is meant to serve as a guide for clinicians to assess and treat common symptoms in MS. This list is comprehensive, but not exhaustive. It should be used as a tool and adjunct to your care plan within the context of your practice setting, and not in lieu of your own clinical decision making. Links are provided as appropriate to serve as further clarification of the assessments and interventions. Visit our [Clinical Study Measures](#) page for additional assessments.

SYMPTOM: FATIGUE (PT AND OT)	
Assessment	Intervention
<ul style="list-style-type: none"> • Modified Fatigue Impact Scale (MFIS) • Manual Muscle Test • 2-Minute Walk Test • 6-Minute Walk Test • Timed 25-Foot Walk (T25-FW) • Visual Analog Scale • Fatigue Severity Scale • Fitness assessment • Equipment assessment • Activity diary • Sleep questionnaire • Evaluation of medications for impact on fatigue level • Depression instrument 	<ul style="list-style-type: none"> • Energy effectiveness strategies • Exercise program • Equipment modifications (mobility, self-care, and ergonomic) • Cooling strategies • Environmental and behavioral modifications (home and jobsite) • Transportation

ASSESSMENT AND INTERVENTIONS IN MS REHABILITATION

SYMPTOM: WALKING DIFFICULTIES (PT)	
Assessment	Intervention
<ul style="list-style-type: none"> • Manual Muscle Test • 2-Minute Walk Test • 6 Minute Walk Test • Timed 25-Foot Walk (T25-FW) • 12 Item Multiple Sclerosis Walking Scale (MSWS-12) • Six Spot Step Test • Four Step Square Test • Hauser Ambulation Index • Rivermead Mobility Index (RMI) • Gait analysis • Tinetti Performance Oriented Mobility Assessment • Timed-Up and Go • Dynamic Gait Index • Functional Gait Assessment • Analysis of environment and tasks • Vestibular and sensory/proprioceptive assessments • Safety evaluations 	<ul style="list-style-type: none"> • Gait training • Gait assistive devices • Behavioral and environmental modifications • Customized Wheeled Mobility • Cooling strategies

ASSESSMENT AND INTERVENTIONS IN MS REHABILITATION

SYMPTOM: WEAKNESS (PT AND OT)	
Assessment	Intervention
<ul style="list-style-type: none">• Manual Muscle Test• Dynamometer; Pinch Meter• Five Times Sit to Stand• Gait analysis• Analysis of environment and tasks• Assessment of transitional movements	<ul style="list-style-type: none">• Exercises for deconditioning• Adaptive equipment• Environmental modifications• Cooling strategies

ASSESSMENT AND INTERVENTIONS IN MS REHABILITATION

SYMPTOM: POOR BALANCE/FALL RISK (PT AND OT)	
Assessment	Intervention
<ul style="list-style-type: none"> • Vestibular, visual, proprioceptive, sensory, spasticity/range of motion, gait analyses • Manual Muscle Test • Berg Balance Scale • 2-Minute Walk Test • 6 Minute Walk Test • Timed 25-Foot Walk (T25-FW) • Timed Up and Go • Dynamic Gait Index • Functional Gait Assessment • Activities-Specific Balance Confidence Scale (ABC) • Functional Reach Test • Dizziness Handicap Inventory • Tinetti Performance Oriented Mobility Assessment • Computerized balance assessment (using tools such as Balance Master) 	<ul style="list-style-type: none"> • Vestibular/balance rehabilitation • Strength training • Gait training – dynamic activities • Supportive footwear • Gait assistive devices • Customized Wheeled Mobility • Gait training • Behavioral modification • Environmental modification • Cooling strategies • Fall Prevention Program

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SYMPTOM: STIFFNESS, SPASMS, SPASTICITY (PT AND OT)

Assessment	Intervention
<ul style="list-style-type: none"> • Range of motion • Modified Ashworth Scale • Multiple Sclerosis Spasticity Scale (MSSS-88) • Consistent communication with neurologist regarding medical management (e.g., medications; intrathecal baclofen pump if severe) 	<ul style="list-style-type: none"> • Stretching exercise program • Environmental modifications • Cooling strategies • Standing frame • AFO, bracing and dynamic splinting • Positioning • Spasticity

SYMPTOM: COGNITIVE CHANGES (OT)

Assessment	Intervention
<ul style="list-style-type: none"> • Referral to a neuropsychologist • Symbols Digit Modalities Test (SDMT) • Timed Up and Go (Cognitive) • Modified Fatigue Impact Scale (MFIS) • Perceived Deficits Questionnaire • PASAT and possibly other neuropsychological screens 	<ul style="list-style-type: none"> • Instruction in compensatory strategies • Assistive devices and environmental modifications

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SYMPTOM: REDUCED MANUAL DEXTERITY (OT)	
Assessment	Intervention
<ul style="list-style-type: none"> • 9-Hole Peg Test • Box and Block • Dynamometer • Pinch Meter • Semmes-Weinstein Sensory Test • Spasticity • Coordination 	<ul style="list-style-type: none"> • Environmental modification • Behavioral modification • Voice-activated software • Bigger grips • Assistive devices • Stretching • Positioning
SYMPTOM: PAIN (PT AND OT)	
Assessment	Intervention
<ul style="list-style-type: none"> • Trigger point assessment • Pain scales • Posture assessment • Equipment/seating assessment • Central vs. peripheral symptoms 	<ul style="list-style-type: none"> • Equipment/seating modifications • Relaxation • Exercise • Pain in Multiple Sclerosis • Behavioral/environmental modifications

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SYMPTOM: TREMOR/ATAXIA (PT AND OT)	
Assessment	Intervention
<ul style="list-style-type: none"> • 9-Hole Peg Test • ADL assessment • Manual Muscle Test • 2-Minute Walk Test • 6 Minute Walk Test • Timed 25-Foot Walk (T25-FW) • Safety evaluation • Canadian Occupational Performance Measure (COPM) • Functional Independence Measure (FIM), or other ADL assessment 	<ul style="list-style-type: none"> • Gait assistive devices • Customized Wheeled Mobility • Weighting; proximal stabilization • Behavioral modification

SYMPTOM: SENSORY CHANGES (PT AND OT)	
Assessment	Intervention
<ul style="list-style-type: none"> • Proprioception • Semmes-Weinstein Sensory Test • Hot/cold discrimination 	<ul style="list-style-type: none"> • Larger grips • Textured surfaces • Supportive footwear • Voice-activated software • Sensory precautions

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SYMPTOM: POOR VISION (OT)	
Assessment	Intervention
<ul style="list-style-type: none"> • Visual acuity • Tracking • Peripheral vision • Visual-perceptual assessment 	<ul style="list-style-type: none"> • Behavioral modification • Environmental modification

SYMPTOM: BLADDER/BOWEL DYSFUNCTION (PT)	
Assessment	Intervention
<ul style="list-style-type: none"> • Always refer to a urologist, physical therapist or gastroenterologist that specializes in treatment 	<ul style="list-style-type: none"> • Pelvic floor training

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SYMPTOM: DECREASED FUNCTIONAL	
Assessment	Intervention
<ul style="list-style-type: none"> • COPM • Multiple Sclerosis Impact Scale (MSIS-29) • Multiple Sclerosis Functional Composite (MSFC) • MS Quality of Life-54 (MSQoL-54) • Guys Neurological Disability Scale • Functional Independence Measure (FIM), or other ADL assessment • Customized Wheeled Mobility 	<ul style="list-style-type: none"> • Assistive equipment • Customized Wheeled Mobility • Behavior and environmental modifications

Reviewed by Sue Kushner, PT, MS, Diane Meyer, PT, MSCS and Brian Hutchinson, PT, MSCS