

<b>DTRs and Plantar Stimulation</b>	
Date: _____ Student: _____ Preceptor: _____	Points (0 or 1)
1. Appropriate positioning Biceps Brachioradialis Triceps Patellar Achilles 2. Good reflex technique and grading 3. Compares symmetry with multiple strikes and threshold testing 4. Augmentation maneuvers when needed 5. Confirm asymmetry in two positions 6. Good plantar stimulation technique	_____ _____ _____ _____ _____ _____ _____ _____
<b>Scoring</b> Total (out of 10 points) 7 or more points to pass 6 or less points is a fail 1 pt each if #4 and #5 unneeded	_____
Pass    Fail (Repeat CEX)    Date _____ Preceptor (sign)	

Reflexes

1. Good positioning for reflexes allows comparison of both sides and usually requires the limb to be relaxed.
2. Good reflex technique requires a pendular swing of the hammer.
3. Reflex grading on a 0-4 scale. (see pocket syllabus exam)
4. Threshold testing = least amount of force to illicit a reflex. This will allow a more accurate comparison from side to side.
5. The two positions for reflex testing are usually sit and supine.
6. Patellar augmentation = hook flexed fingers together and pull apart.
7. Achilles augmentation = patient provides mild plantar flexion as the tendon is struck.
8. Plantar stimulation requires enough pressure for the response, but not so much to produce withdrawal. A normal response is always symmetric and either downgoing or mute (no movement). One toe downgoing and the other mute may be an upper motor neuron sign on the mute side. An upgoing toe is abnormal except in newborns. It can be difficult to tell the difference between upgoing toes and withdrawal.