

MODIFIED ASHWORTH SCALE (MAS)

Assessment of Ankle Plantarflexors

Date: _____

Patient
Number: _____

Investigator: _____

For the purposes of this study:

- Patient is supine. Opposite leg is straight. Arms are in a comfortable position for the patient. Head is midline & resting on the examination table.
- Hip is flexed at 135 degrees, with the knee flexed at 135 degrees. To stabilize the lower limb, one hand holds the leg in the middle 1/3 of the limb posteriorly.
- Hold the foot in a neutral position, neither varus nor valgus. Subtalar neutral. Grasp at forefoot from the plantar aspect.



- The examiner rates the resistance while dorsiflexing the ankle, over a duration of about one second (by counting “one thousand one”), moving the foot from maximum plantar flexion to maximum dorsiflexion.
- Repeat the measurement 5 to 8 times (choose the most reliable / consistent measurement).

Assessment of Ankle Plantarflexors: Circle the correct measurement

Left	Right	
0	0	No increase in muscle tone. Normal muscle tone.
1	1	Slight increased in tone, manifested by a catch and release or by minimal resistance at the end of the range of motion when the affected part is moved in flexion or extension. [4 th QUARTER]
1+	1+	Slight increased in tone, manifested by a catch, followed by minimal resistance throughout the remainder (less than half) of the range of motion. [3 rd QUARTER]
2	2	More marked increase in muscle tone through most of the range of motion, but affected parts are easily moved.
3	3	Considerable increase in muscle tone; passive movements difficult.
4	4	Affected part rigid in flexion or extension.

MODIFIED ASHWORTH SCALE (MAS)

Assessment of Knee Flexors

Date: _____

Patient
Number: _____

Investigator: _____

For the purposes of this study:

- Patient is supine. Opposite leg is straight with hips flexed at 180 degrees. Arms are in a comfortable position for the patient. Head is midline & resting on the examination table.
- One hand maintains hip stabilization at 90 degrees of hip flexion. As much as possible, avoid any hip adduction, abduction, or rotation. Grasp the medial and lateral condyles anteriorly at the top of the knee. The other hand holds the distal 1/3rd of the limb proximal to the ankle posteriorly.



- The examiner rates the resistance while extending the knee, over a duration of about one second (by counting “one thousand one”), moving the distal lower limb from maximum flexion to maximum extension.
- Repeat the measurement 5 to 8 times (choose the most reliable / consistent measurement).

Assessment of Knee Flexors: Circle the correct measurement.

Left	Right	
0	0	No increase in muscle tone. Normal muscle tone.
1	1	Slight increased in tone, manifested by a catch and release or by minimal resistance at the end of the range of motion when the affected part is moved in flexion or extension. [4 th QUARTER]
1+	1+	Slight increased in tone, manifested by a catch, followed by minimal resistance throughout the remainder (less than half) of the range of motion. [3 rd QUARTER]
2	2	More marked increase in muscle tone through most of the range of motion, but affected parts are easily moved.
3	3	Considerable increase in muscle tone; passive movements difficult.
4	4	Affected part rigid in flexion or extension.

MODIFIED ASHWORTH SCALE (MAS)

Assessment of the Elbow Flexors

Date: _____

Patient
Number: _____

Investigator: _____

For the purposes of this study:

- Patient is supine. Opposite arm is in a comfortable position for the patient. Head is midline & resting on the examination table.
- Stabilize the proximal limb by holding the arm posteriorly on the distal 1/3 of the humerus. Keep the shoulder stable by maintaining the arm close to the chest and parallel to the mid-axillary line.
- Hold the distal limb at the distal 1/3 of the forearm posteriorly, keeping the arm in a position as close to neutral as possible.



- The examiner rates the resistance while extending the elbow, over a duration of about one second (by counting “one thousand one”), moving the distal upper limb from maximum flexion to maximum extension.
- Repeat the measurement 5 to 8 times (choose the most reliable / consistent measurement).

Assessment of Elbow Flexors: Circle the correct measurement.

Left	Right	
0	0	No increase in muscle tone. Normal muscle tone.
1	1	Slight increased in tone, manifested by a catch and release or by minimal resistance at the end of the range of motion when the affected part is moved in flexion or extension. [4 th QUARTER]
1+	1+	Slight increased in tone, manifested by a catch, followed by minimal resistance throughout the remainder (less than half) of the range of motion. [3 rd QUARTER]
2	2	More marked increase in muscle tone through most of the range of motion, but affected parts are easily moved.
3	3	Considerable increase in muscle tone; passive movements difficult.
4	4	Affected part rigid in flexion or extension.

MODIFIED ASHWORTH SCALE (MAS)

Assessment of the Wrist Flexors

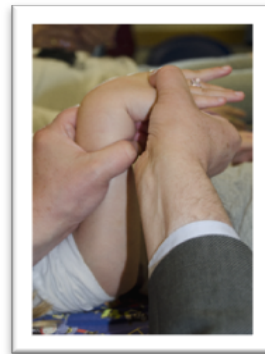
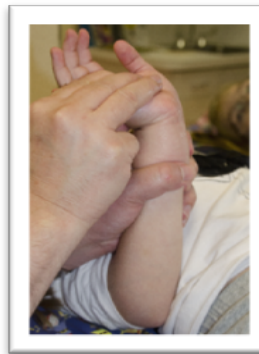
Date: _____

Patient
Number: _____

Investigator: _____

For the purposes of this study:

- Patient is supine. Opposite arm is in a comfortable position for the patient. Head is midline & resting on the examination table.
- Hold the forearm posteriorly on the distal 1/3 just proximal to the wrist joint, keeping the forearm pronated.
- The examiner's thumb is placed on the midpoint of the dorsal surface on the patient's 3rd metacarpal. The examiner's fingers are placed on the patient's mid-palm, allowing the patient's fingers to be free during the evaluation.



- The examiner rates the resistance while extending the wrist, over a duration of about one second (by counting “one thousand one”), moving the wrist from maximum flexion to maximum extension.
- Repeat the measurement 5 to 8 times (choose the most reliable / consistent measurement).

Assessment of Wrist Flexors: Circle the correct measurement.

Left	Right	
0	0	No increase in muscle tone. Normal muscle tone.
1	1	Slight increased in tone, manifested by a catch and release or by minimal resistance at the end of the range of motion when the affected part is moved in flexion or extension. [4 th QUARTER]
1+	1+	Slight increased in tone, manifested by a catch, followed by minimal resistance throughout the remainder (less than half) of the range of motion. [3 rd QUARTER]
2	2	More marked increase in muscle tone through most of the range of motion, but affected parts are easily moved.
3	3	Considerable increase in muscle tone; passive movements difficult.
4	4	Affected part rigid in flexion or extension.