MDT Acute Deteriorating Symptom Clinic assessment
TO BE COMPLETED BY MS PRACTITIONER BOOKING CLINIC
Name:
Hospital number:

University Hospitals Dorset
NHS Foundation Trust

Triage assessment

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PRACTITIONER Choose an item.:

DATE: Click or tap to enter a date. TIME:

Symptoms	
Current acute symptoms	
Date of symptom onset	
What can't you do now, that you could do before the symptoms began?	
Symptoms constant / fluctuating? Symptoms worsening? Onset sudden / gradual?	
Triggers	
Infection screen urine, teeth, toenails, skin? **Illness** colds, chest infection, sickness, feeling unwell? **Stressors** personal, change in circumstances, mood, temp changes **Bowels** Frequency and type (hard/soft/watery) **Change in medication**	**RSU/MSU completed/advised – Y / N (if NO why not)**
Previous relapse history	
Are you or have you been pregnant in during the last few months?	**Y / N**
DMD History	
Drug	
Date started?	
Missed doses? Any problems?	
PMH	

Actions as per pathway:

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☐Referred to GP / Community team management
☐Referred to MDT Acute Deteriorating Symptom clinic – please save this document in client folders, in 'Other' folder

Clinic assessment

DATE: Click or tap to enter a date. TIME:

CLINICIANS PRESENT:

Update	
Changes since triage?	
Infection screen outcome?	
Steroids?	

****If MDT lead by CEH/Neurologist – delete assessment as required and complete OCMs, summary and actions ****

Cranial Nerves	
Any change in vision / smell / hearing / taste / swallow?	Y / N (if Yes – complete relevant sections)
Facial movements Teeth, tongue, cheeks, eyes, eyebrows	
Vision Eye movements Pupil Response Pupil size Visual Fields	

Upper limb		
Dominant hand R / L	**Left**	**Right**
Range of movement		
Power		
Spasticity		
Reflexes		
Sensation *Vibration / pin prick / JPS*		
Coordination		

Finger nose / opposition		

Lower limb		
	Left	**Right**
Range of movement		
Power		
Spasticity *Clonus*		
Spasms - reported		
Reflexes		
Sensation *Vibration / pin prick / JPS*		
Coordination *Heel-shin*		
Balance	Feet together EO: sec Feet together EC: sec Heel-toe walk: stable / unstable / unable	

Mobility	
Current function Transfers Indoors / outdoors / stairs Aids and adjuncts Distance	
Falls Number, mechanism	
Is this different from normal?	Y / N

Bladder and Bowels	
Bowels	
Current function Type / Frequency / Sensation / Incontinence	
Is this different from normal?	Y / N
Bladder	

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Current function Urgency / frequency / incontinence / incomplete emptying / UTIs?	
Is this different from normal?	Y / N

ADL	
Current personal ADL Washing and dressing, showering/bathing/toileting	
Is this different from normal?	Y / N
Current extended ADL Meal and drink prep, ability to transfer items when walking, Cleaning, Laundry, Shopping, Financial affairs, Driving and transport use.	
Is this different from normal?	Y / N

Mood	
How would you describe your mood?	
Is this different from normal?	Y / N
Over the past 2 weeks have you had little or pleasure in doing things?	
Have you been feeling down, depressed, or hopeless?	
PHQ-9 indicated (If yes to the above 2 questions)	Y / N

Fatigue	
Current difficulties	

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Level of fatigue / severity, Pattern of fatigue Sleep	
Is this different from normal?	Y / N

Work	
Current employment	
Is this different from normal?	Y / N

Cognition	
Current symptoms reported. Information processing Attention Memory Executive function Cognitive fatigue	
Communication Word finding, speech clarity, writing, verbal and non-verbal	
Is this different from normal?	Y / N

Outcome measures	
PST	Raw Score: Adjusted z-score: (-1.5 - +1.5 – normal range)
MSIS 29	Physical: /100 Psychological: /100

Summary:

NAME was seen in the MDT Acute Deteriorating Symptom clinic for…

OR

See letter and plan by CEH/Neurologist on EPR

Steroids indicated	Y / N	
Discussion with Neurologist required	Y / N	
To request MRI	Y / N	

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MRI screening questionnaire completed	Y / N	
Onward referrals	Y / N	MS team/other services
ADS Clinic follow up required	Y / N	

Clinic actions	**Initials to complete**
Complete assessment form.	
Decide on action plan.	
Upload assessment form.	
Update clinical record – Seen in MDT ADS clinic. Please see uploaded triage form and plan.	
Update plan for clinic letter.	
Update OCMs.	
Delegate keyworker role (see right)	
Complete clinic sheet and email admin.	

Keyworker Actions
Chase outstanding actions. Complete Data collection spreadsheet. Monitor MRI date & report / consultant response. Update MS Report under RELAPSES when/if relapse confirmed. e.g. results of MRI or clinical confirmation.