FUGL-MEYER ASSESSMENT ID: LOWER EXTREMITY (FMA-LE) Date: Assessment of sensorimotor function Examiner:

Fugl-Meyer AR, Jaasko L, Leyman I, Olsson S, Steglind S: The post-stroke hemiplegic patient. 1. a method for evaluation of physical performance. Scand J Rehabil Med 1975, 7:13-31.

I. Reflex activity, s	supine position			none	can be elicited	
Flexors: knee flexors					2	
Extensors: patellar, achilles (at least one)					2	2
Subtotal I (max 4)						
II. Volitional movement within synergies supine position					partial	full
Flexor synergy: Maxi	0	1	2			
(abduction/external rot	0	1	2			
knee and ankle joint (pensure active knee flex	0	1	2			
	rom flexor synergy to the hip	112.		_	4	
	nee extension and ankle	Hip	extension	0	1	2
	ance is applied to ensure		adduction	0	1	2
	luate both movement and	Knee	extension	0	1	2
strength (compare with	n the unaffected side)	Ankle	plantar flexion	0	1	2
Subtotal II (max 14)						
III. Volitional movement mixing synergies sitting position, knee 10cm from the edge of the chair/bed				none	partial	full
, , , , , , , , , , , , , , , , , , ,	151/6	i/beu	<i>S1</i>	0		
Knee flexion from actively or passively	no active motion less than 90° active flexion, p	palpata tan	done of hametrings		1	
extended knee	more than 90° active flexion	Daipate ter	luons of flamstrings			2
	4.8	191		0		
Ankle dorsiflexion compare with	no active motion limited dorsiflexion			0	1	
unaffected side	complete dorsiflexion			ОТ		2
GOTE.	Subtotal III (max 4)				TE	
IV. Volitional movement with little or no synergy standing position, hip at 0°					partial	full
Knee flexion to 90°				0		
hip at 0°, balance	less than 90° knee flexion and/o				1	
support is allowed	at least 90° knee flexion with					2
				0		
Ankle dorsiflexion	no active motion				1	
compare with unaffected side	limited dorsiflexion		· ·	2		
unanected side	complete dorsiflexion	0.14 (1.15)				
			Subtotal IV (max 4)			
V. Normal reflex activity supine position, assessed only if full score of 4 points is achieved in part IV, compare with the unaffected side				hyper	lively	normal
Reflex activity						
knee flexors,	1 reflex markedly hyperactive or at least 2 reflexes lively				1	
Patellar, Achilles, maximum of 1 reflex lively, none hyperactive						2
• •	1		Subtotal V (max 2)			
				1		

F. COORDINAT	marked	slight	none	
Tremor		0	1	2
Dysmetria	pronounced or unsystematic slight and systematic no dysmetria	0	1	2
	no dysmetna	≥ 6s	2 - 5s	< 2s
Time	6 or more seconds slower than unaffected side 2-5 seconds slower than unaffected side less than 2 seconds difference	0	1	2
	Total F (max 6)		•	

H. SENSATION, lower extremity eyes closed, compare with the unaffected side		anesthesia	hypoesthesia or dysesthesia	normal	
Light touch	leg foot sole	0 0	1	2 2	
		less than 3/4 correct or absence	3/4 correct or considerable difference	correct 100%, little or no difference	
Position small alterations in the position	hip knee ankle great toe (IP-joint)	0 0 0 0 0	1 1 1 1	2 2 2 2	
	2 630		Total H (max12)		

I. PASSIVE JOINT MOTION, lower extremity supine position, compare with the unaffected side			J. JOINT PAIN during passive motion, lower extremity				
		only few degrees	decreased	normal	pronounced pain during movement or very marked pain	some pain	no pain
		(<10° hip)			at the end of the movement		
Hip	Flexion Abduction External rotation	O ₀ R	G\$ I	2 2 2	IVE ORSI	rE	2 2 2
	Internal rotation	0	1	2	0	1	2
Knee	Flexion	0	1	2	0	1	2
	Extension	0	1	2	0	1	2
Ankle	Dorsiflexion	0	1	2	0	1	2
	Plantar flexion	0	1	2	0	1	2
Foot	Pronation	0	1	2	0	1	2
	Supination	0	1	2	0	1	2
Total (Total (max 20)			Total (max 20)			

E. LOWER EXTERMTY	/28
F. COORDINATION / SPEED	/6
TOTAL E-F (motor function)	/34
H. SENSATION	/12
I. PASSIVE JOINT MOTION	/20
J. JOINT PAIN	/20