



Patient Name: _____

File Number: _____

PERCEPTUAL SCREENING SHEET

Perceptual Disorders	Key: P, A	Comments
1. Visual Perception		
Visual Agnosia		
Simultanagnosia		
Color Agnosia		
Color Anomia		
Prosopagnosia		
Metamorphosia		
2. Visual-Spatial Perception		
Depth Perception Dysfunction		
Right-Left Discrimination Dysfunction		
Figure-Ground Discrimination Dysfunction		
Form Constancy Discrimination Dysfunction		
Position in Space Discrimination Dysfunction		
Topographical Disorientation		
3. Body Scheme Perception		
Finger Agnosia		
Unilateral Neglect		
Anosognosia		
4. Motor Perception		
Ideational Apraxia		
Ideomotor Apraxia		
Dressing Apraxia		
Constructional Apraxia		
5. Tactile Perception		
Asterognosis		
Ahylognosia		
Amorphognosia		
Two Point Discrimination Dysfunction		
Agraphesthesia		

Key	P	Present	A	Absent
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Therapist Signature: _____

Date: _____

Perceptual Disorders

Perception:

- The integration of sensory impression into information which is psychologically meaningful. The primary senses must be intact to assess perception
- Check the patient's perceptual disorders and write whether its present or absent

1. Visual Perception	
A. Visual Agnosia	<p>Inability to identify and recognize familiar objects and people despite intact visual anatomical structure</p> <ul style="list-style-type: none"> ▪ Show the patient several familiar items one at a time (e.g., pencil, eyeglasses, hairbrush, keys, wrist watch) ▪ Ask the patient to identify the object
B. Simultanagnosia	<p>Inability to interpret a visual stimulus as a whole</p> <ul style="list-style-type: none"> ▪ Show the patient photographs of detailed scenes (e.g., a farm with animals, a zoo, a city street, the inside of grocery store) ▪ Ask the patient to describe the scene in detail
C. Color Agnosia	<p>Inability to remember the appropriate colors for specific objects. Patients appear to forget colors of common objects. For example, a patient may believe that a banana is blue</p> <ul style="list-style-type: none"> ▪ Ask the patient to name the correct color for the following named objects (do not present the actual object but rather only state the object's name): an apple, an ocean, a banana, a fire engine ▪ Determine whether the patient is able to accurately identify the color of the named objects
D. Color Anomia	<p>Inability to remember the names of colors, it differs from color agnosia in that patients with color anomia may forget the names of colors but would still recognize that a banana is not blue</p> <ul style="list-style-type: none"> ▪ Show the patient flash cards, each having one distinct, simple color (e.g., red, blue, yellow, green, orange, purple) ▪ Ask the patient to name the color

<p>E. Prosopagnosia</p>	<p>Inability to identify familiar faces because the patient cannot perceive the unique expressions of facial muscles that make each human face different</p> <ul style="list-style-type: none"> ▪ Show the patient photographs of familiar people (e.g., world leaders, celebrities, sports figures) ▪ Shows the patient photographs of familiar family members ▪ Ask the patient to identify the names of the people in the photographs or what the famous people are known for ▪ Hold a mirror in front of the patient's face and ask the patient to identify the person reflected in the mirror
<p>F. Metamorphosia</p>	<p>Visual distortion of the physical properties of objects so that objects appear bigger, smaller, heavier, or lighter than they really are</p> <p>Select two of the following:</p> <ul style="list-style-type: none"> ▪ Present the patient with a puzzle of simple shapes with differing sizes. Ask the patient to put the correctly sized into its corresponding cut-out space ▪ Determine whether the patient has difficulty matching the correctly sized shape to its corresponding cut-out space ▪ Present the patient with several objects (e.g., a mug, a full grocery bag, a bag of cotton balls) ▪ Ask the patient to estimate each object's size and weight by observation alone

<p>2. Visual-Spatial Perception</p>	
<p>A. Depth Perception Dysfunction</p>	<p>Inability to determine whether objects in the environment are near or far in relation to each other and in relation to the patient</p> <ul style="list-style-type: none"> ▪ Place several different size blocks on a table in front of the patient. Ask the patient to identify which block is the farthest away, which block is closest, and which blocks are at mid-range between the farthest and the closest blocks ▪ Place the patient in front of window. Ask him or her to identify which objects are closest to the building, which are farthest, and which are at mid-range

<p>B. Right-Left Discrimination Dysfunction</p>	<p>Inability to accurately use the concepts of right and left</p> <ul style="list-style-type: none"> ▪ Ask the patient to point his or her own right and left body parts: <ul style="list-style-type: none"> ○ Point to your left elbow ○ Point to your right knee ○ Point to right shoulder ○ Point to your left foot
<p>C. Figure-Ground Discrimination Dysfunction</p>	<p>Inability to distinguish objects in the foreground from objects in the background</p> <ul style="list-style-type: none"> ▪ Ask the patient to pick out forks from kitchen drawer with disorganized multiple utensils (all having silver color)
<p>D. Form Constancy Discrimination Dysfunction</p>	<p>Inability to recognize subtle variations in form or changes in form such as a size variation of the same object</p> <ul style="list-style-type: none"> ▪ Determine whether the patient is able to identify a familiar object when turned on its side or placed upside down ▪ Ask the patient to identify the following by observation alone (do not allow the patient to manipulate the objects with his or her hands): a plate turned upside down, a fork placed on its side and a pair of scissors opened fully
<p>E. Position in Space Discrimination Dysfunction</p>	<p>Difficulty using concepts relating to positions, such as up/down, in/out, and behind/in front</p> <ul style="list-style-type: none"> ▪ Instruct the patient to follow at least two of the following directions using the above terms: <ul style="list-style-type: none"> ○ Place the key on top of the box. Place the box inside the drawer. ○ Place the comb in front of the mirror and place the hair brush behind the mirror ○ Place the soup can on the top shelf of the cabinet and put the cereal box on the bottom shelf
<p>F. Topographical Disorientation</p>	<p>Difficulty comprehending the relationship of one location to another</p> <ul style="list-style-type: none"> ▪ Ask the patient to find his or her way around the treatment facility using verbal directions or a written or a pictorial map ▪ Select one of the following: <ul style="list-style-type: none"> ○ Ask the patient to find his or her way back from OT treatment setting to his or her hospital room

3. Body Scheme Perception:

The awareness of the spatial characteristics of one's own body in space

A. Finger Agnosia	Impaired perception of the relationship of the fingers to each other. Difficulty identifying and localizing fingers <ul style="list-style-type: none">▪ Instruct the patient to carry out the following commands:<ul style="list-style-type: none">○ Show me your thumbs. Show me your index fingers. Show me your ring fingers○ Touch your ring finger to your thumb○ Touch your index fingers together○ Touch your little finger to your thumb
B. Unilateral Neglect	Inability to integrate and use perceptions from one side of the body or one side of the environment <ul style="list-style-type: none">▪ Ask the patient to perform the following:<ul style="list-style-type: none">○ Draw a clock○ Draw a human figure▪ Ask the patient to read a paragraph from a book or magazine page▪ Observe the patient while eating
C. Anosognosia	Extensive neglect involving failure to recognize one's paralyzed limbs as one's own Ask the patient to perform the following tasks: <ul style="list-style-type: none">▪ Ask the patient to show you his or her affected upper extremity▪ Take the patient's affected upper extremity and shake hands with that limb. Ask the patient whose hand you are shaking▪ Ask the patient to tap the affected leg with his or her unaffected hand, "tap your left leg with your right hand"

<p>4. Motor Perception: Referred as apraxia or motor planning problems. Patients with apraxia have distorted perception of the motor strategies required to negotiate their environment</p>	
<p>A. Ideational Apraxia</p>	<p>Inability to cognitively understand the motor demands of a task involving multiple, sequential steps. For example, a patient may not understand that a shirt is a piece of clothing to be worn on the torso and upper extremities</p> <ul style="list-style-type: none"> ▪ Observe the patient carrying out motor sequences, give the patient 4 of the following verbal commands: <ul style="list-style-type: none"> ○ Wave good-bye ○ Blow a kiss ○ Snap your fingers ○ Touch your left knee ○ Touch your right ear ○ Cross your legs ○ Raise your arm above your head
<p>B. Ideomotor Apraxia</p>	<p>Loss of the kinesthetic memory of motor patterns; in other words, the motor plan for a specific task may be lost. Or the motor plan may be intact, but the patient cannot access the appropriate motor plan and may implement an inappropriate motor plan for a specific task. For example, a patient may cognitively understand that a toothbrush is used for brushing one's teeth but may access an inappropriate motor plan for using a toothbrush to brush his or her hair</p> <ul style="list-style-type: none"> ▪ Observe the patient carrying out motor sequences, give the patient 4 of the following verbal commands: <ul style="list-style-type: none"> ○ Wave good-bye ○ Blow a kiss ○ Snap your fingers ○ Touch your left knee ○ Touch your right ear ○ Cross your legs ○ Raise your arm above your head
<p>C. Dressing Apraxia</p>	<p>Inability to dress oneself due to body-schema disorder or apraxia. For example, a patient with attentional neglect syndrome (unilateral neglect, anosognosia) may dress only half of his or her body</p> <ul style="list-style-type: none"> ▪ Observe the patient during morning ADLs <ul style="list-style-type: none"> ○ For example the patient may attempt to place the pants of his or her torso or may dress only half of his or her body

D. Constructional Apraxia	<p>Inability to copy or build two & three dimensional designs</p> <ul style="list-style-type: none"> ▪ Choose one of the following screening procedures: <ul style="list-style-type: none"> ○ Instruct patient to construct a three dimensional block design (using three dimensional blocks) ○ Instruct patient to construct a house or a car using legos (or similar toy construction pieces)
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<p>5. Tactile Perception: Inability to attach meaning to somatosensory or tactile data</p>	
A. Astereognosis	<p>Inability to identify objects by touch alone</p> <ul style="list-style-type: none"> ▪ Instruct the patient to identify the following by touch alone (occlude the patient's vision): a key, a coin, a paper clip, a wrist watch, a pencil ▪ Test one hand at a time ▪ Alternate the sequence of presented objects for each hand
B. Ahylognosia	<p>Inability to discriminate between different types of materials by touch alone</p> <ul style="list-style-type: none"> ▪ Instruct the patient to identify the following materials by touch alone (occlude the patient's vision): a cotton ball, a piece of metal, a piece of cloth, a piece of rubber, a piece of wood ▪ Test one hand at a time ▪ Alternate the sequence of presented materials for each hand
C. Amorphognosia	<p>Inability to discriminate between different forms by touch alone</p> <ul style="list-style-type: none"> ▪ Instruct the patient to identify the following forms by touch alone (occlude patient's vision): a triangle, a square, a circle, a rectangular, a star ▪ Test one hand at a time ▪ Alternate the sequence of presented forms for each hand

D. Two Point Discrimination Dysfunction	<p>Inability to determine whether the patient can identify whether he or she has been touched with one or two points</p> <ul style="list-style-type: none">▪ Instruct the patient that you are going to touch his or her fingertip with one or two points▪ Test one hand at a time▪ Ask the patient to state whether he or she has been touched by one or two points (occlude patient's vision)
E. Agraphesthesia	<p>Inability to interpret letter written on the palmar surface of the hand</p> <ul style="list-style-type: none">▪ Instruct the patient that you are going to write letters on his or her hand with your fingertip (occlude the patient's vision)▪ Write five letters on the patient's hand, one at a time▪ Ask the patient to identify each letter▪ Test one hand at a time