Multimodal Physical Therapy Management of a Patient with Unilateral Neglect Post-stroke in an Outpatient Setting: a Case Report

Meghan J. Riley, BS, DPT Student
Department of Physical Therapy, University of New England, Portland, Maine

Initial Examination

**Functional Task Analysis**

<table>
<thead>
<tr>
<th>Bed mobility</th>
<th>Roll Left – Min A</th>
<th>Roll Right – Supervision/Setup</th>
<th>Roll Supine – Supervision/Setup</th>
<th>Supine to Sit – Min A</th>
<th>Sit to Supine – Min A</th>
</tr>
</thead>
<tbody>
<tr>
<td>Transfers</td>
<td>Sit to Stand – Min A</td>
<td>Stand to Sit – Min A</td>
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<tr>
<td>Wheelchair mobility</td>
<td>Moderate verbal cueing</td>
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</table>

**Gait Analysis**
- Decreased right step length, decreased left mid-tarse phase
- Left genu recurvatum
- Right lateral trunk lean

**6 Minute Walk Test (6MW Test) and Gait Speed**
- 6MW Test: 90 ft
- Gait Speed: 0.35 ft/sec

**Berg Balance Scale (BBS)**
- Unable to perform

**Timed Up and Go (TUG) Test**
- Unable to perform

Outcomes
- Conducted 19 weeks post-stroke

**10.**

**Discussion**
- The patient showed improvements in the assistance he required for bed mobility, wheelchair mobility, and transfers indicating increased independence and safety.
- His 6MW Test and gait speed improved, suggesting increased overall aerobic and muscular endurance.
- He was able to complete the TUG Test and BBS indicating improved balance.
- The severity of the patient’s ULN, co-morbidities, and polypharmacy altered his progress in terms of reaching full independence with functional mobility over the course of his 10 week treatment.
- This case study is consistent with previous findings within the literature regarding the negative affect ULN has on recovery post-stroke and how it is often associated with falls, longer stays in rehabilitation, and the need for more assistance at discharge.
- Due to the complex nature of ULN syndrome post-stroke, further research is needed to define the subtypes of neglect (motor, perceptual, personal, extrapersonal) prior to implementing the chosen intervention(s).
- In addition, the effects of treatment appear to be relatively transient requiring many PT visits, so an exploration of whether repeated treatments would result in a greater long-term advantage of reduction of ULN would be beneficial.