Cauda Equina Syndrome Tests

Patient name:	_ Age:
Examiner:	Date of examination:
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Straight leg test	
1. Have the patient lie supine.	
2. Gradually lift the patient's leg with the knee kep	S
3. Observe if there is any pain in the lower back or	rieg.
Interpretation:	
Positive test: Pain radiating down the leg or lo	ower back pain indicates nerve root
Negative test: No pain is felt, indicating no ner	rve root compression.
Additional notes:	
Pinprick test	
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1. Use a pin to prick specific dermatomes on the p	patient's leg.
2. Ask the patient to indicate if they feel any pain of	
3. If the patient cannot feel the pinprick, this could	be a sign of cauda equina syndrome.
Interpretation:	
☐ Positive test : The patient does not feel the pi	nprick, indicating nerve damage or compression.
 Negative test: The patient can feel the pinpricl 	
Negative test. The patient can reer the pinphol	k, indicating no herve involvement.
Additional notes:	

Bulbocavernosus reflex (BCR) test

In males:

- 1. Have the patient lie in the supine position with legs abducted and knees flexed.
- 2. Squeeze the glans penis between the thumb and forefinger of one hand. Apply firm pressure for 2-3 seconds.
- 3. Simultaneously, insert a gloved finger into the patient's rectum and palpate the anal sphincter for a reflex contraction.

Interpretation:

Positive test: A positive BCR is indicated by contraction of the anal sphincter in response to squeezing the glans penis.

Negative test: A negative BCR is indicated by no response in the anal sphincter upon squeezing the glans penis.

In females:

- 1. Position the patient as above.
- 2. Gently touch or squeeze the clitoris or labium minus lateral to the clitoris with one hand.
- 3. Palpate the anal sphincter with a gloved finger inserted into the rectum for a reflex contraction.

Interpretation:

Positive test: A positive BCR is indicated by anal sphincter contraction upon stimulation of the clitoris or labium minus.

Negative test: A negative BCR is indicated by no response in the anal sphincter upon stimulation of the clitoris or labium minus.

Additional notes:

Catheter tug test

- 1. Perform a catheter tug test by giving a quick pull on the catheter.
- 2. Observe for a reflex contraction of the external urethral sphincter.
- 3. If the reflex contraction is absent, recognize this as a potential sign of cauda equina syndrome.

Interpretation:
Positive test: A positive catheter tug test is indicated by a reflex contraction of the external urethral sphincter upon pulling on the catheter. Negative test: A negative catheter tug test may suggest cauda equina syndrome, as there is
no reflex contraction of the external urethral sphincter. Further evaluation and testing may be necessary in this case.
Additional notes:
Ankle reflex test
 Position the patient comfortably, either sitting or lying down. Ensure the patient's leg is relaxed and the ankle is slightly dorsiflexed. Use a reflex hammer to gently tap the Achilles tendon. Observe the ankle's response for reflex action. Note any diminished or absent reflexes.
Interpretation:
Positive test: A positive ankle reflex test is indicated by a brisk and symmetrical dorsiflexion of the foot upon tapping the Achilles tendon. Negative test: A negative ankle reflex test may suggest nerve damage or other neurological
disorders, as the ankle does not respond to stimulation of the Achilles tendon.
Additional notes:
Other test results
Magnetic resonance imaging (MRI):

Rectal examination:	
Myelogram:	
CT scan:	
Blood tests:	_
blood tests.	_
Other laboratory tests:	

Additional notes
Healthcare professional's information
Name:
License number:
Contact number:
Signature: