

**This assessment review was compiled by our students and is intended to be used as a guide in assisting clinicians. We encourage you to review the evaluations and assessments for yourself to guarantee the most accurate and updated information.*

I. General Information

Title of the test: The Fluff Test

Author: G. Cocchini, N. Beschin, and M. Jehkonen

Publisher: unknown

Time required to administer: depends on client's performance, but should take ~10 minutes total

Cost of the Test: cost of supplies

II. Description of Test

Type/Purpose of Test: The purpose of this test is to determine the extent of unilateral spatial neglect (USN) syndrome in clients with brain injury. This test examines personal space domain (the client's own body) vs. extrapersonal space. Extrapersonal space is a common area assessed by other tests, so the Fluff Test is unique in its approach to USN.

This test determines what areas of the client's body is affected by USN syndrome and assesses the client's own perception of their body representation. The overall goal of this test is to examine a client's knowledge of the existence of the contralesional side of the body.

Population: Clients with acquired brain injury (traumatic, non-traumatic), CVA (stroke), and any other conditions that may potentially affect body schematic representation of result in visual-spatial neglects.

Focus of measurement:

Organic systems **Abilities** **Participation/life habits** **Environmental Factors**

III. Practical Administration

Ease of Administration: Once a therapist reads throughout the directions, the test is very easy to administer. The article gives a step by step break down and testing parameters that should be followed. The test itself is straightforward and easy to understand. This test is not timed and uses own a few supplies (small circles with Velcro attached and a blindfold).

Clarity of Directions: The directions for this test are very clear and concise. Testing procedure is laid out in a simple format, so that it is very user friendly. 24 circles are placed on the client's body in various areas (picture provided) and the client is asked to remove as many of the circles as they can, while wearing a blindfold.

Scoring Procedures: Once the test is administered, the therapist will count the number of circles that the client was able to locate and remove from their body while wearing the blindfold. The number of circles can be quantified by summing up the circles from each side of the body (ipsilateral vs. contralateral), for each area of the body (arm, trunk, legs), or by simply adding up the total number of circles removed. Based on the therapists own clinical reasoning, the test results are modifiable in this way. Timing is not an issue with the scoring, as the therapist is instructed to give the client enough time to remove as many circles as they can find on their bodies. Testing ends when client removes all circles or believes they have removed all circles.

Examiner Qualification & Training: No training is required to administer this assessment. Reading through the directions once was enough to fully understand the step by step nature of the test, as well as it's overall purpose and relationship to rehabilitation. However, to fully understand exactly what USN syndrome is and it's potential impact on a person's life, it is recommended that the administrator have a medical background.

IV. Technical Considerations

Standardization: Norms Criterion Referenced Other _____

Reliability: Test re-test was ($r = .89$; $p < .05$).

Validity: not stated in the article

Manual: Excellent Adequate Poor
(no manual, just a research article)

What is (are) the setting/s that you would anticipate using this assessment?

Acute Neurorehabilitation settings, SNFs, inpatient/outpatient settings for clients with TBI and CVA.

Summary of strengths and weaknesses:

Weakness: This test is very simple, and results may be biased based on the client's AROM, cognition, and other variables that are unrelated to the actual test. Therefore, it can be assumed that a therapist may very well get skewed results if this test is administered to a client. A simple motor impairment could dramatically alter the client's performance on this test and skew the results.

The authors recommend using this test along with other spatial neglect or body representational tests, to compare results and to validate findings.

Strength: Cheap, no training involved, easy to score, easy to administer. This test can be a quick way of assessing unilateral neglect or body representation syndrome for clients with CVA or a brain injury. Having this information can be beneficial for developing an effective intervention plan for that client.