

HAND COORDINATION

1. Make fists with both hands, place your left fist at the center of your chest and your right fist against your left fist, like this. (Demonstrate)
2. Remain in this position while I explain the test. Do you understand? (Response)
3. When I say begin, you must perform four tasks.
 - The **first** task is to count out loud from one to four while you move your fists in a step—like fashion, making contact between your fists at each step. (Demonstrate while counting out loud 1,2,3,4)
 - The **second** task is to memorize the position of your fists after you have counted to four, clap your hands three times and return your fists to the memorized position. (Demonstrate)
 - The **third** task is to move your fists in a step-like fashion in reverse order, counting out loud from five to eight and returning your left fist to your chest. (Demonstrate while counting out loud 5,6,7,8)
 - The **fourth** task is to open your hands with palms down and place them in your lap. (Demonstrate)
4. Do you understand? (Response)
5. Begin.

Instruction Stage Unable to follow instructions <input type="checkbox"/> Started at wrong time <input type="checkbox"/>	TOTAL CLUES Evaluation Criteria: 3 or More Clues <input type="checkbox"/>
Performance Stage	
<i>Task 1-Forward Steps</i> Improper count <input type="checkbox"/> Improper touch <input type="checkbox"/> Did not perform <input type="checkbox"/>	<i>Task 3-Return Steps</i> Improper count <input type="checkbox"/> Improper touch <input type="checkbox"/> Did not return left fist to chest <input type="checkbox"/> Did not perform <input type="checkbox"/>
<i>Task 2-Hand Clapping</i> Improper count <input type="checkbox"/> Improper touch <input type="checkbox"/> Improper return <input type="checkbox"/> Did not perform <input type="checkbox"/>	<i>Task 4-End Position</i> Improper position <input type="checkbox"/> Did not perform <input type="checkbox"/>

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Parks, Recreation and Historic Preservation

NOTES: _____

STANDARDIZED SEATED BATTERY FIELD SOBRIETY TESTING INSTRUCTIONS AND CLUES

SUBJECT NAME: _____

DATE: _____

CASE#: _____

GENERAL INSTRUCTIONS

1. Please sit straight at the front edge of your seat.
2. Put your arms down at your sides.
3. Place your feet shoulder-width apart so you are comfortable and stable. Are you stable? (Response)
4. Do not move your feet until the tests are over.
5. Stay in this position and do not do anything else until I tell you to do so.
6. Do you understand? (Response)

PRE-TEST QUESTIONS

1. Do you have any physical defects or disabilities?
2. Do you have any defects with your eyes?
3. Are you sick or injured?
4. Are you under the care of a doctor or dentist?
5. Are you taking any medication or drugs?



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HORIZONTAL GAZE NYSTAGMUS Rev 10/15

Administrative Procedures

1. Have the subject remove eyeglasses if worn.
2. Are you wearing contact lenses? **Yes** **No**
3. I am going to check your eyes.
4. Keep your head still and look at the stimulus. Follow the movement of the stimulus with your eyes only. Keep looking at the stimulus until told the test is over. Do you understand? (Response)
5. Position the stimulus about 12-15 inches from the subjects nose.
6. Check for equal pupil size, resting nystagmus and equal tracking.
7. Check for lack of smooth pursuit.
8. Check for distinct & sustained nystagmus at max. deviation.

Clues	Left	Right
Lack of smooth pursuit		
Distinct & sustained nystagmus at max. deviation		
Onset of nystagmus prior to 45-degrees		

TOTAL CLUES
Evaluation Criteria:
4 or More Clues

VERTICAL NYSTAGMUS:
Yes
No

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4 or More Clues

VERTICAL NYSTAGMUS:
Yes
No

FINGER TO NOSE

1. Make a fist with both hands, extend your index fingers & turn your palms forward. (Demonstrate) Remain in this position while I explain the test. Do you understand? (Response)
2. When I say begin, tilt your head back to about a 45° angle & close your eyes. (Demonstrate)
3. When I tell you to, touch the tip of your nose with the tip of your index finger and immediately return it to your side. (Demonstrate and explain the fingertip, pad and side of fingers and demonstrate touching tip of the nose.)
4. When I say right, you must touch your right index finger to your nose; when I say left, you must touch your left index finger to your nose. Do you understand? (Response)
5. Begin. (After head tilt...) Left... Right... Left... Right... Right... Left (After performance...) Open your eyes and straighten your head.

Instruction Stage
Unable to follow instructions
Started at wrong time

Performance Stage
Did not close eyes
Did not tilt head
Open eyes during test
Moved head during test (1"+)

	Left	Right	Left	Right	Right	Left
Wrong hand						
Wrong finger						
Hesitated						
Searched						
Not fingertip						
Missed nose						
Did not bring down						

TOTAL CLUES Evaluation Criteria: 9 or More Clues

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Wrong finger						
Hesitated						
Searched						
Not fingertip						
Missed nose						
Did not bring down						

TOTAL CLUES Evaluation Criteria: 9 or More Clues

PALM PAT

1. Place your hands palm to palm with one hand up and one hand down, like this. (Demonstrate)
2. Remain in this position while I explain the test. Do you understand? (Response)
3. When I tell you to begin, turn the top of your hand over and count out loud "one," then turn the hand back over and count out loud "two," counting only when your hands make contact, like this. (Demonstrate)
4. Repeat this, speed up as you go, and do not stop until told. Make sure to keep your hands and fingers parallel during each pat, like this. (Demonstrate)
5. Do you understand? (Response)
6. Begin. (If necessary, tell to speed up)

Instruction Stage
Unable to follow instructions
Started at wrong time

Performance Stage
Did not count as instructed
Rolled hands
Double pat
Chopped pat
Other improper pat (document)
Did not increase speed
Rotated hands

TOTAL CLUES
Evaluation Criteria:
2 or More Clues

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Unable to follow instructions
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Performance Stage
Did not count as instructed
Rolled hands
Double pat
Chopped pat
Other improper pat (document)
Did not increase speed
Rotated hands

TOTAL CLUES
Evaluation Criteria:
2 or More Clues