

A DISEASE PROCESS MODULE:

UNDERSTANDING MULTIPLE SCLEROSIS



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A Disease Process Module:

UNDERSTANDING MULTIPLE SCLEROSIS

We hope you enjoy this inservice, prepared by registered nurses especially for caregivers like you!

Instructions for the Learner

If you are studying the inservice on your own, please do the following:

- Read through **all** the material. You may find it useful to have a highlighting marker nearby as you read. Highlight any information that is new to you or that you feel is especially important.
- If you have questions about anything you read, please ask your supervisor.
- Take the quiz. Think about each statement and pick the best answer.
- Check with your supervisor for the right answers. You need **8 correct** to pass!
- Print your name, write in the date, and then sign your name.
- Email In the Know at feedback@knowingmore.com with your comments and/or suggestions for improving this inservice.

THANK YOU!

After finishing this inservice, you will be able to:

Describe how damaged myelin leads to the symptoms of MS.



Name and describe the top ten symptoms of MS.



Discuss at least three complications to watch for with MS clients.



Describe at least six ways to help your MS clients stay safe and healthy.



Demonstrate at least three ways to help your MS clients in their daily activities.



A Disease Process Module:
Understanding Multiple Sclerosis

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WHEN MESSAGES CAN'T GET THROUGH!

Picture This: *You wake up in the morning and your eyes feel like they're being stabbed by sharp knives. Your voice is shaky as you say, "Good morning!" You feel dizzy and you trip as you get out of bed.*



A few minutes later, when your arm goes numb, you drop your cup of coffee. You already feel exhausted and have trouble swallowing your breakfast. Then, the muscles in your legs start to spasm—bringing tears to your eyes.

You try to rush to the bathroom but your legs won't cooperate. Halfway there, your bladder gives out. You feel so embarrassed about the mess you've made.

Imagine starting every day this way. This could be your life if you had multiple sclerosis!

- Multiple Sclerosis (or MS for short) is a disease of the central nervous system—the brain and the spinal cord.

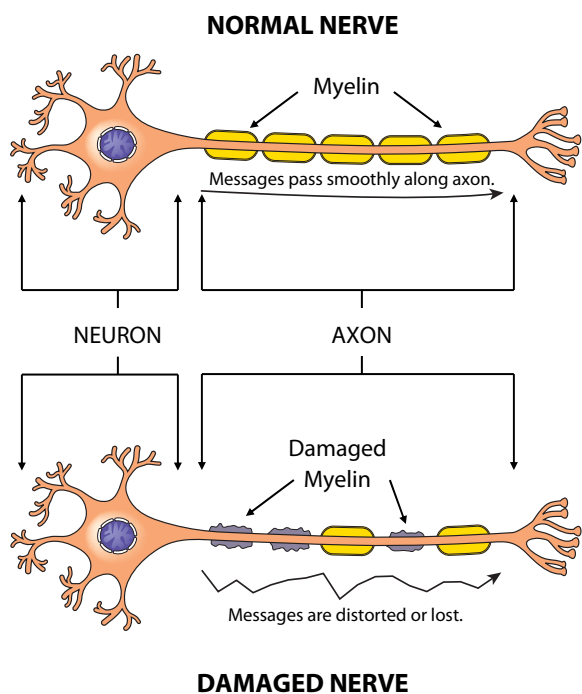
When you want to take a sip of coffee, what happens? Your brain sends an instant message to the muscles in your hand to pick up your cup. Without thinking about it, your hand grabs the cup. But, for people with MS, the right messages don't always get to the muscles. This can keep them from doing even simple things—like picking up a cup of coffee.

- MS is a chronic condition which means that it continues over a long period of time—usually a life-time! It often gets worse as time goes by and can lead to permanent disabilities.
- MS affects everyone in a different way. It depends on what part of the brain is destroyed or damaged.

Keep reading to learn more about multiple sclerosis...

ANATOMY AND PHYSIOLOGY OF MS

WHAT'S REALLY HAPPENING WITH MS?



- A normal nerve is made up of a **neuron** and a **myelin-covered axon**. The neuron is the control center of the nerve. It receives the information from the brain. For example, the brain would like the hand to scratch the nose. The neuron shoots this message down the axon. The message is received at the muscles of the arm and the hand is raised to scratch the nose.
- When a person has MS, the myelin that covers the axon is destroyed. When this happens, those messages between the brain and the nerves arrive **late**—or **not at all!**

SOME TERMS YOU SHOULD KNOW

- **MULTIPLE SCLEROSIS:** Literally means “many scars” (multiple=many, sclerosis=scars). In MS, sclerosis, or scars form when the body replaces the lost myelin around the nerve cells with scar tissue.
- **AUTOIMMUNE DISEASE:** A disease in which the body’s own immune system mistakenly attacks healthy cells, organs, or tissues in the body.
- **NEURON:** The basic cell of the nervous system.
- **AXON:** The extension of a neuron that conducts impulses to other nerve cells or muscles. Axons in the central nervous system are covered with myelin.
- **MYELIN:** A covering that surrounds the axon and helps send electrical messages.
- **DE-MYELINATION:** A loss of myelin that surrounds the nerves of the central nervous system.
- **RE-MYELINATION:** The repair of damaged myelin. The body can repair myelin, but it happens very slowly. Research is currently underway to find a way to speed up this healing process.
- **REMISSION:** When the disease is stable and things are not changing.
- **EXACERBATION:** A time when the disease is getting worse.

WHAT'S NEW?

Grab your favorite highlighter! As you read through this inservice, **highlight five things** you learn that you didn't know before. Share this new information with your supervisor and co-workers!



WHAT CAUSES MULTIPLE SCLEROSIS?

No one knows for sure! Doctors have managed to figure out **what** goes wrong in the brain to cause MS, but they haven't yet figured out **why** it goes wrong.

Most researchers believe MS is caused by a **combination** of things. The areas of focus are immunology (the body's immune system), environmental factors, exposure to certain viruses and genetics. Here's a closer look at what researchers know about each of the contributing factors:

IMMUNOLOGY: Remember, MS is an autoimmune disease which means the body attacks itself. Recent research has discovered the exact immune cells that are attacking the myelin in people with MS. However, it is still unknown why this process starts in the first place—or how to slow or stop it from happening.

ENVIRONMENT: Scientists study the environment to determine if there are toxins in the air or water or problems with the food supply that may cause MS. So far, no link has been made. However, recent research is showing a possible link to lack of Vitamin D. We know that sunlight is needed to produce Vitamin D. It seems that people who live in areas with low exposure to sunlight may have less Vitamin D - and a greater risk of developing MS. This theory has not been proven and research is currently ongoing.

VIRUSES: Researchers know viruses can cause inflammation and damage the myelin. However, it is still unknown if there is a *specific* virus that triggers MS. Some possibilities are measles, herpes, Epstein-Barr (the virus that causes mono) and certain viruses that cause pneumonia. None of these have been proven to trigger MS, so researchers continue to look for a virus that leads to MS.

GENETICS: Scientists have found the MS tends to occur in families. While it is not considered hereditary, having a family member with MS does increase the risk of developing MS. Groundbreaking genetics research is just beginning to scratch the surface of the role of genes in the human body. Scientists are trying to determine if one or more gene may be responsible for a person's chance of developing MS.



WHAT excites YOU?

There are many items available in stores that may help your MS clients in their everyday lives. Many of these "gadgets" help save time and energy. Check with your supervisor and/or family members about getting some of these things for your client:

- Sock puller
- Zipper pulls
- Dressing stick
- Grabbers
- Long handled shoehorn
- Elastic stretch shoelaces
- Velcro strips & fasteners
- Button hole helper
- Soap on a rope
- Shower bench
- Raised toilet seat
- Big handled utensils

"If I thought about it, I could be bitter, but I don't feel like being bitter. Being bitter makes you immobile, and there's too much that I still want to do."

~ Richard Pryor , comedian
(diagnosed with MS at age 46)

HOW IS MULTIPLE SCLEROSIS DIAGNOSED?

DIAGNOSING MS

There is no single test for multiple sclerosis. Doctors look at a series of factors including: history, symptoms, MRI results, nerve functioning tests and other laboratory tests.

Diagnosing MS can be very difficult because symptoms can be vague, they come and go and the symptoms of MS can look a lot like other similar diseases. The doctor that usually diagnoses MS is called a neurologist.

Here are some of the symptoms and tests the neurologist will look at:

- **HISTORY:** Did the symptoms begin between the ages of 10 and 60? (The average age is 34 years.)
- **SYMPTOMS:** Does the person have one or more of the top ten symptoms (see pages 6-8)? Do the symptoms follow a pattern of lasting *at least* 24 hours and occurring *at least* one month apart—or do they get progressively worse over at least six months?



- **MAGNETIC RESONANCE IMAGING (MRI):** An MRI can take a picture of the central nervous system and show the sclerosis (or scars) along the nerves. Can the doctor see evidence of two or more areas of damage?

- **VISUALLY EVOKED POTENTIAL (VEP):** This is a long name for a simple test that measures the response times of certain nerves.

Doctors know that damaged myelin

slows down the messages—which in turn slows response times. This test is now considered one of the most useful tests in helping to confirm an MS diagnosis.

- **OTHER LABORATORY TESTS:** Doctors may perform a spinal fluid analysis and blood tests. While these tests alone cannot diagnose MS, they can help rule out other illnesses that may be causing similar symptoms.



THINK about it!

After reading about the MANY symptoms that go along with MS (on pages 6-8 of this packet) . . . think about some of the clients you have cared for who DO NOT have MS.

Do these symptoms look similar to other diseases you have experience with?

This is one of the reasons diagnosing MS can be so difficult.

Some other diseases that can look like MS are:

- Stroke
- Lupus
- Rheumatoid arthritis
- Viral illnesses
- Depression
- Lyme disease
- Thyroid disorders
- Diabetes
- Parkinson's Disease and
- Alzheimer's Disease.

"I'll find places to grab onto as I walk and talk, sometimes even walking backwards because I have more control that way. People have no idea that I'm doing this."

~ Montel Williams, talk show host
(diagnosed with MS at the age of 43)

HOW IS MULTIPLE SCLEROSIS TREATED?

THE TREATMENT OF MS

So far, there is no cure for MS. But there are medicines that help with the symptoms. This makes living with MS easier.

- For years, steroids have been the main medication for MS, but that may be changing. The government recently approved some new drugs to treat MS.
- Remember...medications are only **one** way to help MS clients.
- Physical, speech and occupational therapists are very helpful to people with multiple sclerosis. These therapists help MS clients recover from attacks. They also help prevent or lessen the number of attacks and work to stop the disease from getting worse.
- Good nutrition and exercise are helpful in the management of multiple sclerosis. (See page 10 for more about this.)
- One hundred years ago, people with MS were treated with herbs and sent to bed. Many of them died after just five years.
- Things have changed! Now, the life expectancy of MS clients is more or less normal.
- And, with treatment, most people with MS can lead happy, productive lives—especially with your help!



CONNECT It NOW!

Apply what you know

Think about a client you care for who suffers from MS.

- **What treatments or therapies work best for your client?**
- **What types of things do you do to help make your MS client's life better?**
- **What will you do differently after reading this inservice?**

Share your thoughts and ideas with your supervisor and co-workers.

SOME COMMON FORMS OF MULTIPLE SCLEROSIS

- **RELAPSING MS:** This is the **most common** form of the disease. Symptoms flare-up and then go away. Flare-ups are also called *relapses* or *exacerbations*. There are stable periods between attacks. When symptoms return they are no worse than during the previous episode.
- **PROGRESSIVE MS:** With progressive MS, there is a gradual *worsening* of symptoms. The rate of progression may vary over time — with temporary or minor improvements but there are no distinct exacerbations or remissions (times when symptoms disappear).
- **PROGRESSIVE-RELAPSING MS:** This is the **least common** form of the disease. Symptoms flare-up and then go away. There are stable periods between attacks. When symptoms return they are progressively worse than during the previous episode.
- **BENIGN:** Benign MS is mild, causing only a few attacks. Then, it usually goes away forever—leaving no permanent disability.

THE TOP TEN SYMPTOMS OF MULTIPLE SCLEROSIS

There is no set pattern to MS. Every person has different symptoms depending on which areas of the central nervous system have been damaged or destroyed.

The first symptoms of MS are often: difficulty walking, numbness or “pins and needles,” blurred, double and/or loss of vision.

Remember...MS is unpredictable. Some symptoms will last for just hours or days and some last for years. They can be mild one day and severe the next.

#1 VISION DIFFICULTIES

Vision problems are often one of the first signs of MS. Your clients may have:

- Blurred, foggy, hazy or double vision.
- Colors that appear “washed out”.
- Rapid, jerky eye movement and eye pain.
- Blindness (in severe cases).



NOTE: Vision problems are caused by inflammation of the nerves in the eye. Usually only one eye is affected. Symptoms are temporary and last for a short time.

#2 COORDINATION PROBLEMS

Your clients with multiple sclerosis may:

- Have trouble walking and have problems keeping their balance.
- Tend to drop things and feel clumsy and uncoordinated.
- Shake, jerk, sway or trip.
- Complaint of dizziness, lightheadedness and spinning feelings.

NOTE: These problems might just be annoying or they might be disabling. They can come and go at any moment.

#3 WEAKNESS

People with MS may complain of:

- A general loss of strength and control in the arms, hands, feet and legs.
- An inability to lift, pull, carry, grip and push things.
- A heavy feeling in one leg, making it difficult to lift. (You may notice this problem when they climb stairs or try to step over something.)
- Weakness in both legs, especially if they’ve had MS for a long time.



THE NEXT STEP!

Apply what you've learned!

After reading through the Top Ten symptoms of MS, take a moment to jot down one thing you can do for each symptom to help your client cope with the difficulty.

- #1 _____
- #2 _____
- #3 _____
- #4 _____
- #5 _____
- #6 _____
- #7 _____
- #8 _____
- #9 _____
- #10 _____

Discuss your ideas with your co-workers and supervisor!

THE TOP TEN SYMPTOMS OF MS, CONTINUED

#4 NUMBNESS

Your clients with MS may feel:

- Numb—especially in their arms and legs. This numbness is usually not painful and is harmless.
- Tingling, a “pins and needles” sensation or like their skin is “crawling”.
- A “band-like” tightness across their bodies and a burning sensation that moves down their backs and legs.
- More sensitive to touch—sometimes even light touches are painful.

NOTE: This symptom doesn’t usually respond to medication.

#5 FATIGUE

You may notice that your MS clients:

- Get tired very easily—often for no particular reason.
- May not be able to tolerate a lot of physical activity without getting “tuckered out”.
- Suffer from exhaustion over their entire bodies. It can be hard to overcome.

NOTE: Fatigue is one of the most troublesome symptoms of MS. Over 75% of people with MS report problems with fatigue.

#6 SPEECH DIFFICULTIES

Your clients with MS may:

- Have very mild speech problems that almost go unnoticed.
- Talk slowly or hesitate between words.
- Speak with a slight slur. Or their voice may be shaky, especially if they are having muscle tremors.
- Talk in a “jerky” manner. (The words may seem to *explode* out of their mouths.)
- Complain about having trouble with swallowing.

#7 SPASTICITY

People with MS may experience:

- Spastic muscles—especially in their legs. This makes their muscles tight and stiff so they don’t move smoothly.
- Spasms in their muscles which may be mildly uncomfortable or very painful.
- Times when their legs lock up or “give out” entirely.
- A limp or one leg that drags.

NOTE: It takes more effort for people with MS to walk and get around.

FAMOUS PEOPLE WITH MS

ANNETTE FUNICELLO

Singer, dancer, former Mouseketeer

MICHAEL CRICHTON

Writer of ER, and Jurassic Park

JUDY GRAHAM

Writer of historical and romance novels

LENA HORNE

Actress and singer

RICHARD PRYOR

Comedian and actor

LOUISE MANDRELL

Singer, star of musical theatre

BETTY CUTHBERT

Olympic gold medalist in sprinting

ALAN OSMOND

Singer, brother of Donny and Marie

MONTEL WILLIAMS

Talk show host and actor

A NOTE TO GOD

*"I see the homeless with no place to go,
I see the hungry so sick and frail,
I see the beaten with hate in their eyes,
I see the lost children with no hope,
I see those who lost so much in war,
If I had three wishes - they would be,
Homes and food for the homeless and hungry,
Tenderness for the beaten and lost,
And love for all so there will be no more wars,*

***I thank you God for I am blessed,
I only have the illness known as MS."***

~ Linda Lehmann, Multiple Sclerosis, Support Group Leader

THE TOP TEN SYMPTOMS OF MS, CONTINUED

#8 BOWEL & BLADDER ISSUES

You may notice that your MS clients have:

- Constipation. This is the most common bowel problem although diarrhea can happen, too.
- Frequency—the need to urinate often (sometimes *constantly*). This is a common early symptom of multiple sclerosis.
- Urgency—the urge to urinate right now! They may not be able to hold their urine once the urge is felt.
- Hesitancy—trouble getting started when they want to urinate.
- Retention—their bladders don't empty completely.
- Nocturia—waking up at night because of the need to urinate. (Or, urine may just leak out during sleep.)
- Incontinence—some leakage of urine and/or total loss of control.

NOTE: Bowel and bladder symptoms may be temporary or may continue for a long time. It depends on the type of MS. Changes in diet, routine, adding supplements or medications may help control symptoms. If the urinary problems get too bad, your client may need to use a catheter several times a day or may need a permanent catheter.

#9 SEXUAL CHANGES

Your clients may tell you that:

- Their sexual response is affected by MS, too.
- They have trouble with impotence (*males*).
- They have difficulties with arousal (*female*).
- Have a loss of sensation all over their bodies.
- Being overly sensitive to touch makes sexual contact painful.

#10 MENTAL CHANGES

Your clients may complain that:

- They are more forgetful than they were in the past. (Usually, the forgetfulness is fairly mild.)
- It takes them longer to think of a name or a thought.
- Being able to concentrate and to stay organized may be more difficult.

NOTE: Not too long ago, multiple sclerosis was thought to have only *physical* symptoms. That has changed. Now, the medical community realizes that MS does affect *mental* abilities and emotions. Not everyone with MS has these problems and they usually don't show up with the first attack. Remember that other factors like medications, depression, stress and fatigue may all have an affect on mental abilities.



GET OUT!

Thinking outside the box!

Working with clients in the home often requires coming up with creative solutions to common problems.

- **THE PROBLEM:** You are caring for a 56 year old woman with progressive -relapsing MS.
- She recently had a relapse that landed her in bed for nearly a week with weakness, fatigue, trouble walking and talking and difficulty with memory and concentration.
- This week, she is feeling stronger. She wants to get dressed, go for a walk outside, and visit her neighbor who has been ill.
- **WHAT YOU KNOW:** You know she needs to pace herself. You also know it is very hot outside and symptoms can worsen with heat. And, you know she shouldn't be around other sick people just yet.
- **GET CREATIVE:** Think of **3 creative solutions** you might suggest to your client to help her be as active as possible without exposing herself to conditions that may trigger another relapse.
- **TALK ABOUT IT:** Share your ideas with your co-workers and supervisor and find out how they would solve the problem.

COMPLICATIONS RELATED TO MS

PRESSURE SORES: Pressure sores usually begin with redness or blisters on the skin.

- Some MS clients lose the “signal” that tells them to shift their weight while sitting or lying down. This keeps them in one position for too long and puts them at risk for pressure sores.
- These sores tend to show up on the thighs, buttocks, tail bone and heels—or any part of the body that presses against a hard surface (like a bed or wheelchair).

URINARY TRACT INFECTIONS (UTI’S): These include infections of the kidneys, bladder and urethra.

- UTI’s are triggered by the many bladder problems that MS clients tend to have.
- Urinary infections require medications and can become chronic.

PAIN: Most MS symptoms cause some degree of physical discomfort.

- A few people with MS have sudden jabs of pain on one side of the face—especially the mouth, cheekbone, jaw, eye socket and forehead. And, it’s often triggered by physical activity such as chewing, talking, singing or sudden laughter.
- Another cause of pain is optic neuritis. It triggers intense, hot pains from the eye nerve up to and behind the eyeball.
- Spasticity can cause pain, too. Muscle spasms (like “charley horses”) put the legs into painful contractions.

WEIGHT GAIN: A possible problem for MS clients who can’t exercise.

HYPEREXTENSION: This can happen when weakened hip muscles force clients to swing their legs out to clear their foot off the ground.

COLD FEET: This (usually) harmless problem is due to poor circulation.

FOOT DROP: If the foot and ankle muscles are weak, it can cause the toe to drop while the client is walking.

SWOLLEN ANKLES: A common problem for those who aren’t active. It can get worse in the summer due to the heat.

DEPRESSION: A problem with any chronic disease. It may be mild or serious.



5 KEY POINTS

Key Points to Remember

1. The symptoms of MS are caused by scarring (sclerosis) on the nerves of the central nervous system.
2. No one know what causes MS and there is currently NO cure.
3. Medication, physical therapy, exercise and a positive attitude go a long way in managing the most troublesome symptoms of multiple sclerosis.
4. Most people live a long time with MS. It’s not considered a “fatal” disease.
5. Promising new research is underway every day to help slow and stop the progression of damage—and to prevent it from ever starting in the first place!

***“As soon as we find a cure,
we will utilize any of the
donations to go toward providing
medication to those who can’t
afford it. That is my goal.”***

~ Montel Williams

TIPS FOR HELPING CLIENTS WITH MS

HELPING WITH MEDICATION

- Remind your clients to take their medications on time. Medications work better when they're taken on schedule.
- If childproof medicine caps are difficult for your clients to remove, suggest that they request *regular caps* from the pharmacy. (*Caution—if there are children in the house, take extra care to keep all medications out of their reach!*)
- If your clients manage their own medications, help them keep their drugs organized. For example, suggest they use a plastic pill box with a compartment for each day of the week.
- Remind your clients to drink lots of water with their medications.
- Let your supervisor know right away, if your MS clients aren't taking their medications properly.



HELPING WITH NUTRITION

- Eating balanced meals is very important! Encourage your clients to eat properly and to avoid skipping meals.
- If you cook for your client, do your best to include foods high in fiber. Avoid sweets, fried foods and fatty meats to help promote good health and to avoid constipation.
- Encourage your clients to eat foods with plenty of fiber— like raw vegetables, fresh fruits, bran cereals, fruit juices, and whole grain breads. This will help prevent or manage constipation.
- Avoiding dehydration is also important. Remind your clients to drink plenty of fluids! Eight to ten

cups of fluid a day is necessary for good bowel health.

- Keep in mind that drinking lots of fluid might pose a problem for MS clients who suffer from bladder problems. Talk with your supervisor about how to help your clients balance their need for fluids with their bladder problems.
- Many doctors and nutritionists recommend a daily intake of cranberry juice for people who suffer from bladder infections. It helps acidify the urine and keeps bacteria from growing in the bladder.



HELPING WITH ACTIVITY

- Check with your supervisor about encouraging your MS client to get regular exercise. Physical activity improves general health and emotional well-being. And it will help muscle tone.
- Water exercise is helpful because it's easier on the joints and it offers buoyancy so your that your MS client uses less energy. The cool water is helpful, too, so that they don't get too hot!!
- Remind your clients to *pace themselves!* Don't let them do too much all at once. This helps prevent MS fatigue.



MORE TIPS FOR HELPING CLIENTS WITH MS

MANAGING EXTREME TEMPERATURES

- Remember that warm temperatures make MS symptoms worse and can cause flare-ups. Don't let your MS clients overdo it.
- Since heat causes MS symptoms to get worse, remind your clients to use air conditioning in their homes, room and cars. They should also avoid steam baths, saunas, and too much sun!
- When bathing, remind your MS clients not to soak in the tub too long or to use overly hot water.
- If your clients get too hot, try running cool water over their wrists for 3 to 4 minutes. *Or* have them suck on a piece of ice. *Or* have them take a cold bath or shower. Fanning helps, too.
- Encourage your clients to wear comfortable clothing and to dress in layers which will help them have better control over their body temperature.

CONSERVING ENERGY

- MS fatigue is a big problem for many clients, so encourage them to take lots of rest breaks throughout the day.
- Your clients will have good days and bad days. On a good day, your clients may be full of energy and eager to be active. Remind them not to overdo it so they won't get tired or make their symptoms worse.
- Encourage your clients to rest before they become exhausted.

- Help your clients break an activity down into a series of smaller tasks. And, remind them to save some activities for another day.
- Help your clients organize their rooms or homes to help save their energy. *For example:*
 - Place frequently used things within easy reach.
 - Use pegboards to hang things on.
 - Use a "lazy susan" to bring things within easy reach.

HELPING WITH COMFORT/PAIN

- If your MS clients suffer from leg cramps, you can offer to massage their legs for them.
- To help with muscle spasms, you may want to suggest taking a warm bath instead of a shower. (*Not too warm, though...remember heat can make MS symptoms worse.*) When helping your clients get dressed, dress the weak part of the body first. To undress, take the garment off the strong side first.
 - Suggest that your clients wear clothes made from "silky" fabric. Slippery fabrics make it easier to move when changing positions.
 - If your clients sit a lot, suggest they wear clothes a size larger than they normally wear. Larger clothing will be more comfortable and is easier to put on and take off.





A Disease Process Module:
Understanding Multiple Sclerosis

EMPLOYEE NAME
(Please print):

DATE: _____

- ***I understand the information presented in this inservice.***
- ***I have completed this inservice and answered at least eight of the test questions correctly.***

EMPLOYEE SIGNATURE:

SUPERVISOR SIGNATURE:

Inservice Credit:

<input type="checkbox"/> Self Study	1 hour
<input type="checkbox"/> Group Study	1 hour

File completed test in employee's personnel file.

Are you "in the know" about multiple sclerosis? Circle the best answer or fill in the blank. Then check your answers with your supervisor!

- True or False**
The symptoms of MS are caused by damage to myelin in the central nervous system.
- Fill in the Blank**
A disease in which the body's own immune system mistakenly attacks healthy cells, organs, or tissues in the body is known as an _____ disease.
- True or False**
Researchers believe MS is mainly caused by a lack of Vitamin D.
- True or False**
Diagnosing MS is easy. Doctors just observe the client for any of the top ten symptoms.
- Which form of MS is the most common?**
A. Benign MS.
B. Progressive MS.
C. Relapsing MS.
D. Progressive-Relapsing MS.
- True or False**
Water exercise is helpful for clients with MS because it is easy on the joints.
- Fill in the Blank**
When helping your clients get *dressed*, dress the _____ part of the body first.
To *undress*, take the garment off the _____ side first.
- True or False**
Vision problems are often one of the first, noticeable signs of MS.
- True or False**
Symptoms of MS can be mild one day and severe the next.
- True or False**
People with MS are at increased risk of developing pressure sores and urinary tract infections.