

PATIENT NAME \_\_\_\_\_

DATE \_\_\_\_\_

## Biomechanical Evaluation

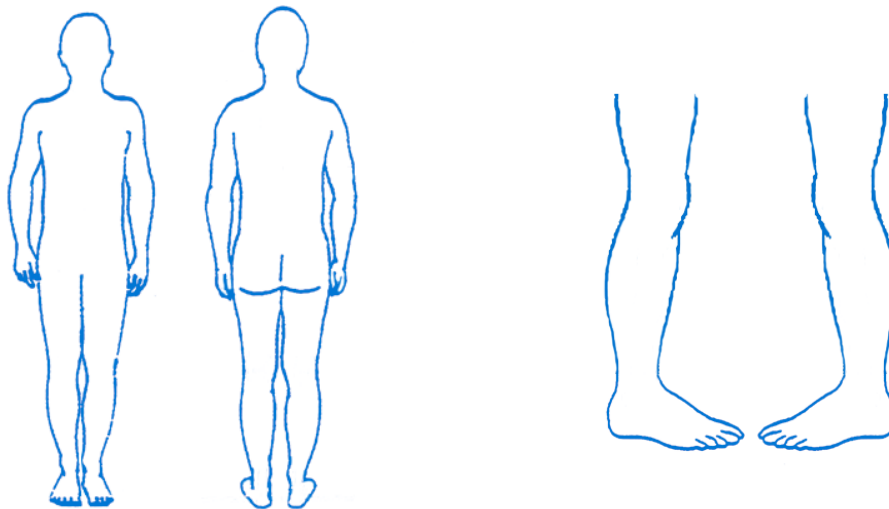
### PATIENT COMPLAINT

Is this a Biomechanical Problem? \_\_\_\_\_

What is the Patient's Concern? \_\_\_\_\_

Why have they come for treatment? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



### ACTIVITIES LEVELS

What is contributing to Symptoms? \_\_\_\_\_

Sport Involvement? \_\_\_\_\_

Shoe Wear Patterns? \_\_\_\_\_

### CONCLUSION AT THIS STAGE


\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Is the problem Mechanical in origin? - If yes continue Biomechanical Assessment



## Prone Assessment

SUBTALAR JOINT	
ROM	normal is inv > ev
NEUTRAL	heel generally slightly inverted to leg
AXIS POSITION	join 2 points on axis
FF to RF POSITION	
ANKLE ROM	knee flexed and extended



## Supine Assessment

FIRST MTPJ ROM	> 45°
FHL TEST	
FIRST RAY ROM	Equal DF and PF
OBLIQUE AXIS ORIENTATION	
MALLEOLAR ORIENTATION	
HAMSTRING FLEXIBILITY	

## Weightbearing Assessment

RCSP	
NCSP	
TIBIAL POSITION	varum / valgum
NAVICULAR DRIFT	normal: drift = drop
NAVICULAR DROP	
SUPINATION RESISTANCE	low / moderate / hard
JACK'S TEST	immediate / delayed
LUNGE TEST	distance from wall > 9-10cm
	angle to wall > 38-40°

