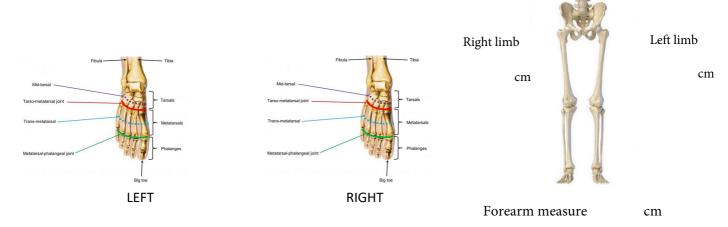


#### **LOWER EXTREMITIES ASSESSMENT**

Name:	
Country:	DOB:

Hip	PROM Left	PROM Right	MMT Left	MMT Right	Primary MIC	Secondary MIC
Flexion	/120	/120				
Extension	/ 30	/ 30				
Abduction	/ 45	/ 45				
Adduction	/ 30	/ 30				
Internal Rotation	/ 45	/45				
External Rotation	/45	/ 45				
Knee						
Flexion	/140	/ 140				
Extension	/0	/0				
Ankle						
Plantar flexion	/ 50	/ 50				
Dorsi flexion	/ 20	/ 20				
Inversion						
Eversion					_	

### **LIMB DEFICIENCY**



#### **LEG LENGTH DIFFERENCE**

Left leg (from ASIS to Medial Malleoli)	cm
Right leg (from ASIS to Medial Malleoli)	cm
Difference:	cm



## **MUSCLE TONE EVALUATION**

Hypertonia		Ashworth Scale (put cross in box)						
MIC: minimal Grade 1	Grade 0	Grade 1	Grade 2	Grade 3	Grade 4			
on 1 of 5 muscles/groups be								
Hip Adductors	Left							
	Right							
Hamstrings	Left							
	Right							
Rectus Femoris	Left							
	Right							
Soleus	Left							
	Right							
Gastrocnemius	Left							
	Right							

Ataxia		SARA Scale of Assessing and Rating Ataxia (put cross in box)										
MIC: minimal Gr	MIC: minimal Grade 2		e 0	Grade	2 1	Grade 2	Gr	ade 3	G	rade 4		
on A and B and C												
A: Heel-shin	Left											
slide												
3 trials	Right											
best trial rated												
Outcome heel-shin		Left & right added together and divided by 2 = final grade										
Slide Final grade	Slide Final grade											
		(Left	+ Right .	) ÷ 2 :	= Grade .							
B: Stance		Grade 0	Grade	1 Gr	ade 2	Grade 3	Grade	4 Gr	ade 5	Grade 6		
3 trials allowed												
best trial rated												
C: Gait	Grade	Grade	Grade	Grade	Grade	Grade	Grade	Grade	Grade			
		0	1	2	3	4	5	6	7	8		

Athetosis MIC: minimal grade 1 on both duration and amplitude for A or A+B			DIS Dyskenisia Impairment Scale (put cross in box)									
			DURATION				AMPLITUDE					
			0	1	2	3	4	0	1	2	3	4
A: Sitting	A: Sitting Leg proximal Flexion & Extension	Left										
_		Right										
	Leg distal Plantar & Dorsi flexion	Left										
		Right										
B: Stand	Leg proximal	Left										
		Right										
	Leg distal	Left										
		Right										



# **EVALUATION OF FUNCTIONAL TEST**

Rig	ht	Lef	
Voc		Lei	t
Yes	No	Yes	No
Remarks:		Remarks:	
Yes			No
Remarks:			
Yes	No	Yes	No
Remarks:		Remarks:	
Yes	No	Yes	No
Remarks:		Remarks:	
ble	Yes		No
F	Yes Remarks: Yes Remarks: Yes Remarks:	Yes Remarks:  Yes No Remarks:  Yes No Remarks:	Remarks:  Yes  Remarks:  Yes  No Yes  Remarks:  Yes  No Yes  Remarks:  Remarks:  Remarks:  Remarks:

Player signature: \_\_\_\_