

The purpose of the screening is to probe your history of injuries as this is one of the strongest predictors of future injury, as well looking at your range of movement, strength stability of your body segments to identify areas at risk of injury and in need of improvement. A suggested core program has been developed based on your screening results.

Injuries

Tight shoulder and hamstrings - attends physio once a week for this. Tendancy to cramp if dehydrated. Reports back pain with bowling if bowling action not quite right - otherwise ok. Plays soccer and cross country running in the winter.

Posture

Ankle/Foot				
Knee to wall	11	11	Pain on posterior impingement	<input type="checkbox"/> <input type="checkbox"/>
<i>Average</i>	13	13	Pain on shin palpation	<input type="checkbox"/> <input type="checkbox"/>
<i>Max</i>	15	17	Foot shape	Prontated
<i>Min</i>	7	1		

Knee/Hip

Knee/Hip			Hip ADDuction strength			
Pain on palpation tib tubercle	<input type="checkbox"/>	<input type="checkbox"/>			160	160
Pain on McMurrays Medial	<input type="checkbox"/>	<input type="checkbox"/>	Average		195	189
Pain on McMurrays Lateral	<input type="checkbox"/>	<input type="checkbox"/>	Max		235	230
Hamstring length (knee extension)	50	60	Min		130	130
Average	70	70	Thomas - Hip Abduction		5	5
Max	90	90	Average		5.8	5.7
Min	40	40	Max		20	20
Pain on hip quadrant	<input type="checkbox"/>	<input type="checkbox"/>	Min		0	0
Pain on hip FABER	<input type="checkbox"/>	<input type="checkbox"/>				
Hip flexion before lumbar spine	100	100	Hip Internal rotation ROM		Neutral	90 deg flex
Average	102	103	Average		50	50
Max	120	120	Max		30	30
Min	90	100	Min		45	45
Thomas - Hip Extension	0	0	Hip External rotation ROM		60	70
Average	4.36	4.40	Average		50	50
Max	20	20	Max		40	40
Min	-10	-10	Min		54	56
Hip ABDuction strength	180	170	Groin squeeze		34	35
Average	215	220	Average		70	70
Max	270	288	Max		55	60
Min	153	150	Min		40	35
					107	<input checked="" type="checkbox"/> <input checked="" type="checkbox"/>
					165	
					275	
					83	

Shoulder				External rotation ROM		90	110
Hawkins impingement	<input type="checkbox"/>	<input type="checkbox"/>		<i>Average</i>		114	119
Empty can testing pain	<input type="checkbox"/>	<input type="checkbox"/>		<i>Max</i>		140	140
Full can testing pain	<input type="checkbox"/>	<input type="checkbox"/>		<i>Min</i>		90	90
Obrien's testing pain	<input type="checkbox"/>	<input type="checkbox"/>		Internal rotation ROM		70	60
External rotation strength	115	<input type="checkbox"/> 112	<input type="checkbox"/>	<i>Average</i>		73	66.3
<i>Average</i>	173	177		<i>Max</i>		95	90
<i>Max</i>	233	239		<i>Min</i>		45	50
<i>Min</i>	50	50		Thoracic spine			
Internal rotation strength	120	<input type="checkbox"/> 132	<input type="checkbox"/>	Rotation		85	85
<i>Average</i>	177	177		<i>Average</i>		78	79
<i>Max</i>	239	0		<i>Max</i>		90	90
<i>Min</i>	40	-1		<i>Min</i>		65	65
Lumbar Spine				Combined elevation		5	
Pain on 1 leg extension	<input type="checkbox"/>	<input type="checkbox"/>		<i>Average</i>		13	
Pain on quadrant	<input type="checkbox"/>	<input type="checkbox"/>		<i>Max</i>		36	
Slump test knee extension	50	60		<i>min</i>		0	
<i>Average</i>	58	58		Calf raises		10	10
<i>Max</i>	90	90		<i>Average</i>		14	14
<i>Min</i>	0	0		<i>Max</i>		20	20
Slump test back pain	<input type="checkbox"/>	<input type="checkbox"/>		<i>Min</i>		10	10
Hyper mobility				Core control - Abdominals (/5)		3	
Elbow	<input type="checkbox"/>	<input type="checkbox"/>		<i>Average</i>		3.9	
Thumb	<input type="checkbox"/>	<input type="checkbox"/>		<i>Max</i>		34	
Knees	<input type="checkbox"/>	<input type="checkbox"/>		<i>Min</i>		1	
1 leg stability		Non dominant	Dominant				
1 leg squat knee control		Excessive movement		Excessive movement			
1 leg squat pelvic control		Excessive movement		Excessive movement			
1 leg hop knee control		Excessive movement		Excessivemovemet			
1 leg hop pelvic control		Excessive movement		Excessive movment			
Core control - Gluteal bridge		Excessive pelvic rotation & spine extension		Excessive spine extension			
Calf raise control		Excessive prontation		Excessive prontation			

Notes

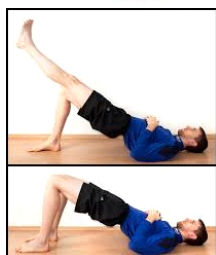
Sports Podiatrist review - orthotics and footwear review recommended. Hydration very important for cramp prevention. Continued work on shoulder balance important. Recovery - stretching, hydration, diet, water recovery all important to manage cramping.

Please continue to work hard on your bowling technique and be mindful of your bowling workload this season. Don't hesitate to call me to discuss any of your screening results or injuries in the future. The exercises suggested are a starting point and can be further developed with us or your local physiotherapist. Kind regards, Dan Redrup 0431911615

Mobility



Stength/Stability



Clam Shell Bent knee

Lying on your side, push top heel into bottom heel by using muscles in lower part of your gluteals, do not allow trunk to twist backwards, lift top knee away from lower knee slowly, do not use hamstrings or hip flexors to do this, rep 15-30 sets 2-4

Clam shell Straigh knee

Push top heel into bottom legs knee by using muscles in lower part of your gluteals, do not allow trunk to twist backwards, lift top knee away from lower leg slowly, do not use hamstrings or hip flexors to do this, rep 15-30 sets 2-4

2 leg Bridge

Using your gluteals, not hamstrings or lower back - Lift your pelvis so you form a bridge position with a straight line running from your shoulders to your knees. 5 sec hold x 5

1 leg bridge static

Using your gluteals, not hamstrings or lower back - Lift your pelvis to a 2 leg bridge position, take 1 leg out in line with the other thigh, 5 sec hold, repeat other side, return to ground. X 5

Lower abdominal - feet supported

Using your abdominal muscles - do not let your lower back raise off the floor as your leg extends away from your body. Hold end position for 3 sec, repeat each leg x 5.

Lower abdominal - feet unsupported

Starting with both feet off the floor. Using your abdominal muscles - do not let your lower back raise off the floor as 1 leg extends away from your body +/- opposite arm and leg. Repeat each leg x 5.



Posterior pelvic tilting

Initially start with knee bent as this is an easier position to do this in, rotate pelvis so front of shorts move towards ceiling, do this without moving your upper back x 5 x 3 sets.



Crunches

Starting in slight peeled up position so bottom tips of shoulder just touch the ground. Crunch up so shoulder blades lose contact with ground, return to starting position (not flat), repeat 10-20 reps or fatigue.



Roll up

As slow as possible start peeling up from the starting position without lifting your feet off the ground. Return to starting position twice as slow - ensure



1 leg squat

Start on one leg and lower to 45-60 degrees of knee bending (not 90), keep pelvis (pant line) level, keep shoulders in line with hips (don't lean to side), keep spine in nice straight alignment (don't bend or hyper extend). Repeat 5-10



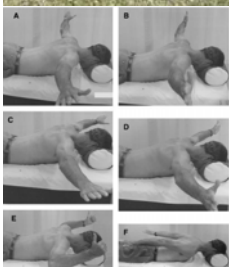
2 leg squat

Lower to a maximum of 90 degrees of knee bending. keep shoulders in line with hips (don't lean to side), keep spine in nice straight alignment (don't bend or hyper extend). Repeat 5-10



Walking lunge

Lunge to a length that your back leg ends up pointing directly towards the ground (perpendicular), don't let your front knee drift past your front toes, keep most of your weight on your FRONT leg throughout. Repeat opposite leg lunge.



Blackburns

The important element of all these positions is that the movement is generated from the shoulder blades as they move together.