Huds Valley Chiropractic Health Services P.C.  172-17 Jamaica Avenue  Jamaica, NY 11432  [] No deviation  [] Visual Limp L/R  [] Gait abnormally was presented as antalgic/ataxic  [] needs cane  [] unable to walk on toes/heels			
Ambulation [] Normal [] Fain [] Guarded [] Impaired [] Needs Assistance [] Wheelchair			
NEUROLOGICAL TESTING			
Sensation Hypoesthesia L R	WNL H	yperesthesia L R_	WNL
Manual Myotomal Muscle Testing (Graded 0 to 5, 5 being normal) with/without Pain  C5: L5 R / C6: L R / C7: L S R / C8: L R / T1: L S R /  L1: L R / L2: L R / L3: L R / L4: L R / L5:			
C5: $L \leq R \leq C6$ : $L \leq R \leq R \leq R$	C7: L. S R 4	C8: IS_ I	TI: L S R Y
LI:L TRY L2:L TRY	L3:LJRY	L4: L \ R 4	1.5: L J R 4
SI: L TRY			
Muscle Strength Reflex (Graded +0 to +4, +2 being normal)			
C5: Ltrh C6: Lnrh C7: th Rt2			
C5: Itrh C6: In R C7: In R T2  L4: It R H L5: L H R H SI: I. H R H			
Dermatomal evaluation of C4 to T1 and L1 to S2 was normal bilaterally with the exception of:			
Pathological, Abnormal Cerebellar and Dorsal Column Reflex were/were not present			
ORTHOPEDIC EXAMINATION CERVICAL & LUMBAR TESTS			
Cervical Compression	Negative Positive		
Cervical Distraction	Negative Positive		
Maximum Foraminal Compression	Negative Positive		
Shoulder Depression	Negative Positive	IR	
Kemp's	Negative Positive	LR	
Ely's Test	Negative Positive	L-R	
Braggards Test	Negative Positive	LE	
Yeoman's Test	Negative Positive	1,0	
Linder's Sign/ Soto Hall	Negative Positive	>	
Bilateral Leg Raise	Raise Negative Positive		
SPINAL RANGE OF MOTION TESTING			
CERVICAL SPINE NORMAL	MEASURED I	PAIN NOTED	PAIN NOTED