BokSmart MUSCULOSKELETAL assessment data capturing form

1. QUESTIONNAIRE

PERSONAL DETAILS:			Date:	
NAME: TEL. NUMBER: ID NUMBER: DOCTOR'S TEL:		AGE: EMAIL:		
PLAYING EXPERIENCE (HIGH SCHOOL - PR HIGHEST LEVEL ACHIEVED: POSITION:	ESENT):			

TRAINING HABITS:

DO YOU WARM UP PRIOR TO :		
MATCHES:	YES	
TRAINING:	YES	

OFF SEASON TRAINING HABITS:

SPORT	X PER WEEK	TIME
RUNNING		
SWIMMING		
HIKING		
CYCLING		
STRETCHING		
WEIGHT TRAINING		
OTHER		

NO NO

IN SEASON TRAINING HABITS:

SPORT	X PER WEEK	TIME
RUNNING		
SWIMMING		
HIKING		
CYCLING		
STRETCHING		
WEIGHT TRAINING		
OTHER		

PROTECTIVE EQUIPMENT: REGULAR USAGE (80% OR MORE) DURING TRAINING AND GAMES

PROTECTIVE EQUIPMENT	TRAINING	COMPETITION	
ANKLE BRACE			
KNEE BRACE			(YES/NO)
WRIST BRACE			
MOUTH GUARD			
OTHER (THERMAL SHORTS)			
ODTHOTICS			

ORTHOTICS:

DO YOU WEAR ORTHOTICS: WHEN WERE THEY LAST CHANGED:

(months)

NO

DO YOU COOL DOWN AFTER:

MATCHES:	YES	NO
TRAINING:	YES	NO

PRE SEASON TRAINING HABITS:

SPORT	X PER WEEK	TIME
RUNNING		
SWIMMING		
HIKING		
CYCLING		
STRETCHING		
WEIGHT TRAINING		
OTHER		

RECOVERY HABITS:

MODALITIES	TRAINING	MATCH	TIME
ACTIVE RECOVERY			
SWIMMING			
ICE BATHS			
COMPRESSION GARM	/IENTS		
STRETCHING			
MASSAGE			
DIET			

INJURY HISTORY:

REGION	LEFT/RIGHT	CURRENT INJURY	Past 12 months	Resolved	Injury
		Yes/No	Yes/No	Yes/No	Specify
SHOULDER					
ELBOW					
WRIST					
HAND/FINGER					
NECK					
THORACIC SPINE					
LOWER BACK					
SACRO ILIAC JOINT					
HIP/GROIN					
QUADRICEPS					
HAMSTRING					
KNEE					
SHIN/LOWER LEG					
ANKLE					
ACHILLES TENDON					
FOOT					
OTHER					

POSTURAL ASSESSMENT: MARK WITH A TICK

POSTURE COMPONENT	RATING SCALE				
POSTORE COMPONENT	NORMAL	MILD ASYN	MMETRY	SIGNIFICANT ASYMMETRY	
SHOULDER SYMMETRY					
SHOULDER ROUNDNESS					
HIP SYMMETRY					
	NORMAL	SCOLIOSIS CO	NVEX LEFT	SCOLIOSIS CONVEX RIGHT	
SPINAL CURVATURE					
	INCREASED KYPHOSIS/LORDOSIS	NORM	1AL	DECREASED KYPHOSIS/LORDOSIS	
THORACIC KYPHOSIS					
LUMBAR LORDOSIS					
	NORMAL		KNEES HYPEREXTENDED		
KNEE HYPEREXTENSION					

FLEXIBILITY TESTS:

PASSIVE STRAIGHT LEG RAISE:			
		LEFT	DEGREES
		RIGHT	DEGREES
ACTIVE KNEE EXTENSION:			
		LEFT	DEGREES
		RIGHT	DEGREES
MODIFIED THOMAS TEST:			
	KNEE	LEFT	DEGREES
		RIGHT	DEGREES
			·
	HIP	LEFT	DEGREES
		RIGHT	DEGREES

ACTIVE INTERNAL AND EXTERNAL	ROM:			
	INTERNAL	LEFT		DEGREES
		RIGHT		DEGREES
				1
	EXTERNAL	LEFT		DEGREES
		RIGHT		DEGREES
ANKLE DORSIFLEXION LUNGE:				
		LEFT		Ісм
		RIGHT		СМ
				10.11
SIT AND REACH:				
]см
				-
LUMBAR SPINE EXTENSION:				_
]см
LUMBAR FORWARD FLEXION:				-
				CM

LEVEL OF SEGMENTAL	YES	NO
STIFFNESS		
LUMBAR STIFFNESS (L1-5)		
LOWER THORACIC (T7-T12)		

COMBINED ELEVATION TEST:

CALF HEEL RAISE

CONDINED ELEVATION TEST.				-		
				СМ		
SHOULDER ROTATION:				_		
	INTERNAL	LEFT		DEGREES		
		RIGHT		DEGREES		
				-		
	EXTERNAL	LEFT		DEGREES		
		RIGHT		DEGREES		
				_		
POSTERIOR SHOULDER TIGHTNES	S:					
		LEFT		DEGREES		
		RIGHT		DEGREES		
				7		
NEURAL MOBILITY TESTS:						
ACTIVE SLUMP TEST		LEFT		DEGREES		
		RIGHT		DEGREES		
ULTT1		LEFT		DEGREES		
SETT		RIGHT		DEGREES		
		illorri				
STABILITY AND STRENGTH:						
STABLETT AND STRENGTH.						
4 POINT HOLD						
				MIN/SECS		
			1.0		D'-L	
BRIDGING HOLD			Left	7 (an an	Right	

LEFT RIGHT MIN/SECS

MIN/SECS

	REPS
	REPS

DEEP NECK FLEXORS

20-22mmHg and hold for 10sec 24mmHg and hold for 10 sec 26mmHg and hold for 10sec 28mmHg and hold for 10sec 30mmHg and hold for 10 sec

Average

с	Yes	No
	Yes	No

No

PROPRIOCEPTION:

Y Lower Quarter BALANCE TEST

CE TEST		Left (cm)	Right (cm)	Difference
	Lower limb length			
	Anterior			
	Posteriormedial			
	Posteriorlateral			
	Composite			
	Composite =	<u>(</u> A+PM+PL <u>)</u>	x100	

3XLL

SPECIAL TESTS:

ULTRASOUND OF LATERAL ABDOMINAL WALL

	CON	ITRACTED		RELAXE	D
LEFT	ТА	MM	LEFT	ТА	MM
RIGHT	IA	MM	RIGHT		MM
LEFT	10	MM	LEFT	IO	MM
RIGHT	10	MM	RIGHT	10	MM
LEFT		MM	LEFT		MM
RIGHT	EO	MM	RIGHT	EO	MM

ADDUCTOR SQUEEZE TEST

1	mm/Hg
2	mm/Hg
3	mm/Hg
	mm/Hg