

# Efficient Examination Printable Templates

## Efficient Lumbar Spine Clinical Examination

### Seated Tests and Measures

- Seated posture
- Neurological examination (SLUMP test, dermatome myotomes, reflex testing)

### Standing Tests and Measures

- Gait
- Heel walk and toe walk
- Squat
- Single leg squat
- Single leg balance
- Cardinal plane testing
- Functional stability tests

### Supine Tests and Measures

- Gross lower extremity AROM and PROM screening
- Active straight leg assessment (neural tension, disc involvement, hamstring length, lumbar stability)
- Supine stability tests (bent knee fall out, bent knee heel slides)
- Palpation
- Sacroiliac joint tests (distraction, thigh thrust)

### Sidelying Tests and Measures

- Strength testing (gluteus medius)
- Sacroiliac joint tests (compression)

### Prone Tests and Measures

- Thoracic and lumbar PA mobility assessment
- Strength testing (gluteus maximus)
- Prone stability tests (prone instability test, prone knee bend, sacral rocking)
- Palpation (iliac crests, PSIS, sacral ILA, ischial tuberosities)

# Efficient Shoulder Clinical Examination

## Starting Tests and Measures

static postural assessment of the GHJ and scapula  
gross cervical, elbow, and wrist AROM screening  
shoulder AROM assessment  
shoulder strength testing  
erratus anterior strength testing  
special tests (Hawkins-Kennedy, Neers, Drop Arm, IRRT/ERRT, IR lag)  
1<sup>st</sup> and 2<sup>nd</sup> rib assessment  
movement analysis (stand behind the patient and assess scapular movement).

## Uppper Limb Tests and Measures

shoulder IR/ER AROM  
upper limb tension testing per location of pain (median, ulnar, radial)  
special testing (apprehension test, relocation test)  
muscle length test (pec minor and latissimus dorsi)  
cervical segmental joint mobility

## Trunk Tests and Measures

middle and lower trapezius strength testing  
joint mobility of CT junction and thoracic spine

# Efficient Cervical Clinical Examination

## **Imaging Tests and Measures**

radiovertebral scan (VBI, ligament stress testing, Jefferson fracture test)

## **Neurological Tests and Measures**

neurological tests (dermatomes, myotomes, reflexes)

shoulder static and dynamic postural assessment

cervical cardinal plane testing

cervical special tests (compression, distraction, Spurling's test)

first and second rib assessment

## **Range of Motion Tests and Measures**

cervical PROM testing

supine special testing (deep neck flexor endurance test)

segmental mobility testing

muscle length testing (pectoralis major and minor)

upper limb tension testing (median, radial, ulnar)

## **Strength Tests and Measures**

middle and lower trapezius strength testing

joint mobility of CT junction and thoracic spine

# Efficient Knee Clinical Examination

## **Standing Tests and Measures**

Standing posture

Gait

Squat/overhead squat/single leg step down

Single leg balance

Lumbar spine cardinal plane testing

## **Supine Tests and Measures**

Lower extremity resting posture

Observation/palpation

Hip and ankle A/PROM

Knee A/PROM with overpressure

Special tests

Joint mobility

Neural tension testing (if warranted)

## Treatment Paradigm

- 1) Exam, Eval, Dx, POC, Intervention
  - o Re-assessment of asterisks sign & movements
  - o Done within and between treatm
- 2) Manual therapy
  - o Immediately re-assess asterisks si functional movements
- 3) Motor control exercises
  - o Correcting movements patterns
- 4) Outcome Assessment
  - o Re-assess asterisks sign &/or func movements
- 5) Functional warm-up
  - o Jog, burpees, bear crawls, walking etc.
  - “Activation” exercises that prime the ne system & increase core temperature
- 6) Speed, agility, power
- 7) Strength
- 8) Metabolic conditioning
  - o High intensity training relative to patient tolerance
- 9) Motor control
  - o Challenging the kinetic chain in fatigued state
  - o Must be intentional/purposeful
  - o May include speed, agility, power for the athlete returning to sport
- 10) Cool down
  - o Easy aerobic movements followed by static stretching
  - o Often skipped, but useful in reducing soreness & maintaining mobility
- 11) Outcome Assessment
  - o Re-assess asterisks sign &/or functional movements