

Registration/ ID No: _____ Date of Assessment: _____

Referral Source: _____ Examiner: _____

Name: _____ Age: _____ Gender: _____ Photo _____

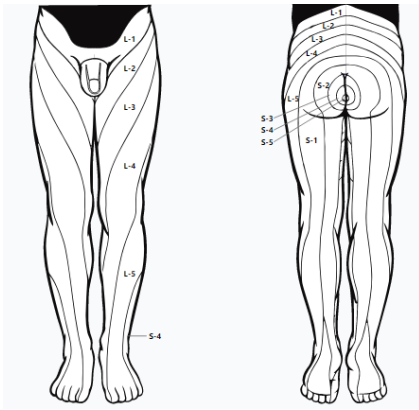
Address: _____ Occupation/ Stress: _____

Contact No: _____ Referral Diagnosis: _____

Chief Complaint: _____

HPC: _____

Duration of the symptom: _____



Write the status of pain using a 10cm Visual Analogue Scale (write UA, if not assessed)

Pain at rest	Centimeter
Pain at sitting for more than 5 minutes	Centimeter
Pain at standing more than 5 minutes	Centimeter
Pain at Walking more than 5 minutes	Centimeter
Pain in any functional movement	Centimeter
Pain at more than 30 minutes of daily activities	Centimeter

(Please mark symptoms here)

Posture and Functional Assessment:

Standing: _____ Pelvic Tilt: _____ Rib/ Xipi sternum: _____

Sitting: _____ Transition (sit-stand): _____ Bed Mobility: _____

Pain and Movement Limitations: (Mention the limited ROM only, painful limitations are also considered as a limitation)

Thoracic Spine: _____ Lumbar Spine: _____ Hip: _____ SIJ : _____

Knee : _____ Ankle: _____ Cervical Spine : _____ Shoulder: _____

Gait:

Passive Stretch Test (tick mark):

Pain (Left)			Tightness (Left)			Muscles/ Groups	Pain (Right)			Tightness (Right)		
Mi	Mo	Se	Mi	Mo	Se		Mi	Mo	Se	Mi	Mo	Se
						Lumbar Extensor (Both)						
						Lumbar Flexor (Both)						
						QoLu						
						Iliopsoas						
						Quads						
						Hamstring						
						Gluteus Minimus						
						Ankle Dorsiflexor						
						Ankle Pl. Flexor						
						Gluteus Medius						
						Piriformis						
						Gluteus Maximus						
						Hip Adductor						

Institute of Advanced Mechanical Correction Therapy™

Structural Diagnosis and Management © in Musculoskeletal Medicine (Lumbar Spine Assessment)

Strength Test (tick mark):

Oxford Muscle Grade (Left)						Muscles/ Groups	Oxford Muscle Grade (Right)					
0	1	2	3	4	5		0	1	2	3	4	5
						Iliopsoas						
						Rectus & Transverse Ab.						
						QoL & Piriformis						
						Gluteus Minimus						
						Hip Adductor						
						Gluteus Medius						
						Lumbar Extensor (Core)						
						Gluteus Maximus						
						Hamstring						
						Quadriceps						
						Pelvic Floor						

Neurological Examination of affected Part or mostly affected part only (tick mark & Mention Rt/Lt):

Sensory			Nerve Root	Motor					
Diminished	Impaired	Intact		0	1	2	3	4	5
			L2						
			L3						
			L4						
			L5						
			S1						

Cough/ Sneeze/ Stress:

SLUMP:

Reflex:

Incontinence:

(Affected Side- SLR)	0-30	31-45	46-70	71-90	>90	(Unaffected Side- SLR)	0-30	31-45	46-70	71-90	>90

Sciatic:

Tibial:

Sural:

Common Peroneal:

Femoral:

Saphenous:

Others:

Previous Medication:

Co-morbidity:

Previous Physiotherapy:

Surgery/ Trauma:

X-ray/ MRI/ CT (with date):

Provisional Diagnosis: (Tick)

- SD- Type A (Muscular Dysfunction)
- SD- Type B (Muscular and Neurological Dysfunction)
- SD- Type C (Complete Mechanical Dysfunction)

Treatment Principle (write):

Stretching:

Strengthening:

Neural mechanics:

Activation:

Structural Management:

Stabilization:

Maintenance/Self-exercise at home:

Others/ Electro-physical agents:

STROBE Statement—Checklist of items that should be included in reports of *cross-sectional studies*

	Item No	Recommendation	Page no
Title and abstract	1	(a) Indicate the study's design with a commonly used term in the title or the abstract	2
		(b) Provide in the abstract an informative and balanced summary of what was done and what was found	2
Introduction			3-5
Background/rationale	2	Explain the scientific background and rationale for the investigation being reported	3-4
Objectives	3	State specific objectives, including any prespecified hypotheses	4-5
Methods			5-8
Study design	4	Present key elements of study design early in the paper	5
Setting	5	Describe the setting, locations, and relevant dates, including periods of recruitment, exposure, follow-up, and data collection	5
Participants	6	(a) Give the eligibility criteria, and the sources and methods of selection of participants	5-6
Variables	7	Clearly define all outcomes, exposures, predictors, potential confounders, and effect modifiers. Give diagnostic criteria, if applicable	6-7
Data sources/ measurement	8*	For each variable of interest, give sources of data and details of methods of assessment (measurement). Describe comparability of assessment methods if there is more than one group	6-8
Bias	9	Describe any efforts to address potential sources of bias	NA
Study size	10	Explain how the study size was arrived at	5
Quantitative variables	11	Explain how quantitative variables were handled in the analyses. If applicable, describe which groupings were chosen and why	6-7
Statistical methods	12	(a) Describe all statistical methods, including those used to control for confounding	8
		(b) Describe any methods used to examine subgroups and interactions	8
		(c) Explain how missing data were addressed	NA
		(d) If applicable, describe analytical methods taking account of sampling strategy	8
		(e) Describe any sensitivity analyses	NA
Results			8-10
Participants	13*	(a) Report numbers of individuals at each stage of study—eg numbers potentially eligible, examined for eligibility, confirmed eligible, included in the study, completing follow-up, and analysed	8-9
		(b) Give reasons for non-participation at each stage	NA
		(c) Consider use of a flow diagram	NA
Descriptive data	14*	(a) Give characteristics of study participants (eg demographic, clinical, social) and information on exposures and potential confounders	8-9
		(b) Indicate number of participants with missing data for each variable of interest	NA
Outcome data	15*	Report numbers of outcome events or summary measures	8-10
Main results	16	(a) Give unadjusted estimates and, if applicable, confounder-adjusted estimates and their precision (eg, 95% confidence interval). Make clear which confounders were adjusted for and why they were included	NA

		(b) Report category boundaries when continuous variables were categorized	Tab-2
		(c) If relevant, consider translating estimates of relative risk into absolute risk for a meaningful time period	NA
Other analyses	17	Report other analyses done—eg analyses of subgroups and interactions, and sensitivity analyses	NA
Discussion			11-13
Key results	18	Summarise key results with reference to study objectives	11
Limitations	19	Discuss limitations of the study, taking into account sources of potential bias or imprecision. Discuss both direction and magnitude of any potential bias	12-13
Interpretation	20	Give a cautious overall interpretation of results considering objectives, limitations, multiplicity of analyses, results from similar studies, and other relevant evidence	11-13
Generalisability	21	Discuss the generalisability (external validity) of the study results	12-13
Other information			13
Funding	22	Give the source of funding and the role of the funders for the present study and, if applicable, for the original study on which the present article is based	13

NA= Not applicable, Tab 2= Table 2

*Give information separately for exposed and unexposed groups.

Note: An Explanation and Elaboration article discusses each checklist item and gives methodological background and published examples of transparent reporting. The STROBE checklist is best used in conjunction with this article (freely available on the Web sites of PLoS Medicine at <http://www.plosmedicine.org/>, Annals of Internal Medicine at <http://www.annals.org/>, and Epidemiology at <http://www.epidem.com/>). Information on the STROBE Initiative is available at www.strobe-statement.org.