# UPPER EXTREMITY PHYSICAL EXAMINATION FORM

**NAME** _____ **DATE**_____

**ROM (active, active assisted and/or passive) (visual, goniometer, inclinometer, other:_____)**

| Shoulder | Abduction | Adduction | Forward Flexion | Extension | Int. Rotation | Ext. Rotation | Scapular Elevation | Scapula Protrac | Scapula Retract | Painful arc |
|---|---|---|---|---|---|---|---|---|---|---|
| Normal | 180 | 50 | 180 | 60 | 90 | 90 | | | | |
| Left | | | | | | | | | | |
| Right | | | | | | | | | | |
| MM | Mid Delt, SS | PecMaj, Lat | Delt, Coracobr | Lat, TeresMaj | IS,TeresMin | Subscap, Pect | Trap, LevSc | SerrAnt | Rhom [2] | |

| Elbow | Flexion | Extension | Supination | Pronation |
|---|---|---|---|---|
| Normal | 150 | 10 | 90 | 90 |
| Left | | | | |
| Right | | | | |
| MM | Brachialis, Biceps C5, 6 | Triceps C7 | Biceps C5, 6 supinator C6 | Pronator teres C6 , Pronator quad C8-T1 |

| Wrist | Palmar Flexion | Extension / Dorsiflexion | Ulnar Deviation | Radial Deviation |
|---|---|---|---|---|
| Normal | 80 | 70 | 30 | 20 |
| Left | | | | |
| Right | | | | |
| MM | FCR, FCU | ECRL, ECRB, ECU | FCU, ECU | ECRB, ECRL, APL, EPB |

## NEUROLOGICAL EXAMINATION

| Level | Motor test, [cord level, nerve] | Motor x/5 +/- | Reflex [cord level] | DTR Wexler | Sensation | Exam (1.Pin; 2.2-Pt; 3.Vib; 4.Semmes-W) |
|---|---|---|---|---|---|---|
| | | L R | | L R | | L = < > R |
| C5 | Deltoid [C5 axillary n.]<br>Biceps [C5,6 musculocutaneous n] | __/5 __/5<br>__/5 __/5 | Biceps [C5, C6] | __/5 __/5 | C5 / Axillary n. | |
| C6 | Biceps [C5,6 musculocutaneous n]<br>Wrist Extensors [C6,7 radial n]*rad=C6 uln=C7* | __/5 __/5<br>__/5 __/5 | Brachioradialis [C6] | __/5 __/5 | C6 / Musculocut. n. | |
| C7 | Triceps [C7 radial n.]<br>Wrist Flexors [C7 median/ulnar n]<br>Finger Extenders [C7 radial n] | __/5 __/5<br>__/5 __/5<br>__/5 __/5 | Triceps [C7] | __/5 __/5 | C7 / Digit 3, palmar [variable] | |
| C8 | Finger Flexors [C8,T1 median/ulnar n] | __/5 __/5 | Wrst(C7,8); Uln(C8,1) | __/5 __/5 | C8 / Med antebr cut n. | |
| T1 | Finger Abd/Add [T1 ulnar n] | __/5 __/5 | Ulnar (C8, T1) | __/5 __/5 | T1 / Med antebr cut n. | |

| Pathological | Hoffman (Corticospinal tract) / UMN _____/_____ | Clonus (L / R elb / knee) | Spastic / flaccid Paralysis L / R UE / LE |
|---|---|---|---|
| Grip / Pinch Strength<br>Dominant L/R (Circle) | Right hand: ( Pain induced Y / N )<br>1st_____kg/lbs; 2nd_____kg/lbs; 3rd_____kg/lbs | Left hand: ( Pain induced Y / N )<br>1st_____kg/lbs; 2nd_____kg/lbs; 3rd_____kg/lbs | |
| Circumference | Upp Ext.: Brach. _____/_____ in. / cm (_____" above elbow) | AnteBr. _____/_____ in. / cm (_____" below elbow) | |

**NOTES:** _____

# LOWER EXTREMITY PHYSICAL EXAMINATION FORM

**NAME** _____ **DATE**_____

## ROM (active, active assisted and/or passive) (visual, goniometer, inclinometer, other:_____)

| **Hip** | **Abduction** | **Adduction** | **Flexion** | **Extention** | **Internal Rotation** | **External Rotation** |
|---|---|---|---|---|---|---|
| **Normal** | **50** | **30** | **135** | **30** | **43** | **42** |
| Left | | | | | | |
| Right | | | | | | |
| MM | Glut medius | Adductor longus | Iliopsoas | Glut Max | Adductor longus, brevis | Glut max, obt. ext. |

| **Knee** | **Flexion** | **Extenwion** | **Internal Rotation** | **External Rotation** |
|---|---|---|---|---|
| **Normal** | **148** | **0** | **10** | **10** |
| Left | | | | |
| Right | | | | |
| MM | Semimemb/tend/biceps | Quad | cannot be isolated | cannot be isolated |

| **Ankle** | **Dorsiflexion** | **Plantar flexion** | **Inversion** | **Eversion** |
|---|---|---|---|---|
| **Normal** | **20** | **50** | **35** | **15** |
| Left | | | | |
| Right | | | | |
| MM | Tibialis ant, EDL, EHL | Gastroc, Soleus, Plantaris | Tibialis post, FDL, FHL | Peronius,long, brev, tertius |

## 5. NEUROLOGICAL EXAMINATION: Rule out Nerve Root lesion

| **Level** | **Motor test:** **[cord level, nerve]** | **Motor** x/5 + / - | **Reflex [cord level]** | **DTR (Wexler)** | **Sensation** | **Exam (1.Pin; 2.2-pt 3.Vib; 4.Semmes-W** |
|---|---|---|---|---|---|---|
| | | L R | | L R | | L = < > R |
| **T12-L3** | **Iliopsoas** -Hip Flexion [T12-L3] | ____/5; ____/5 | **Cremasteric** (L1,2) | **P / A** **P / A** | **T12-L3 derm.** | |
| **L2-L4** | **Quadriceps** - Knee Ext. [L3,4 femoral n.]<br>Hip adductors [L2-4 obturator n.] | ____/5; ____/5 | **Patellar** [L2,L3, **L4**] | _____/5; _____/5 | **L2-L4 dermatome** | |
| **L4** | **Tibialis Anterior** [L4, deep peroneal n.] | ____/5; ____/5 | **Patellar** [L2,L3, **L4**] | _____/5; _____/5 | **L4 dermatome** | |
| **L5** | **Ext Hall Long** [L5, deep peroneal n.]<br>**Ext Dig Long/Brev** [L5, deep peroneal n.]<br>**Gluteus Medius** [L5, supr.glut.n.] | ____/5; ____/5 | **Hamstring / (semitendinosis)**<br>[L4. **L5**, S1, 2] | _____/5; _____/5 | **L5 dermatome** | |
| **S1** | **Peroneus Lng/Brev** [L5,S1 sup.peroneal n]<br>**Gastrocnemius-soleus** [S1, inf. glut. n.] | ____/5; ____/5 | **Achilles [S1]** | _____/5; _____/5 | **S1 dermatome** | |

**Chest:** Insp_____ Exp_____ (_____ICS) | **Low Ext.**: Thigh _____/_____ in. / cm (_____" above Patella) | Calf _____/_____ in. / cm (_____" below patella)

**NOTES:** _____