

Postural Assessment Chart

Patient information

Name:

Gender:

Date of birth:

Contact:

Address:

Anterior & posterior view

Upper body

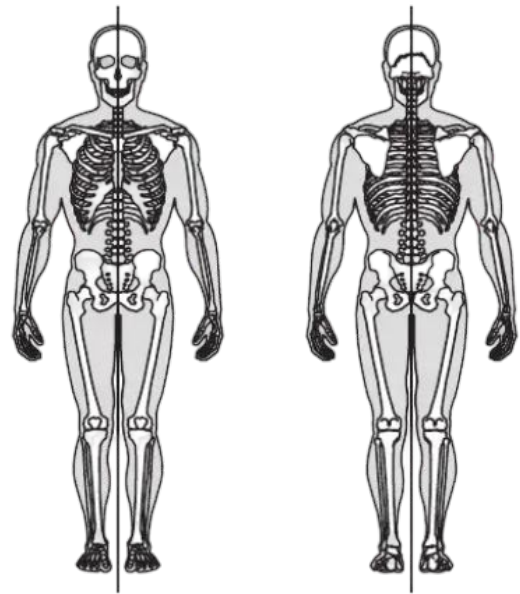
L R

Spine _____ Scoliosis ☐ ☐
 Scapula _____ Deviation ☐ ☐
 Shoulder _____ Deviation ☐ ☐
 Head _____ Tilt ☐ ☐
 _____ Rotation ☐ ☐

Lower body

L R

Foot & ankle complex _____ Toe (out) ☐ ☐
 _____ Toe (in) ☐ ☐
 _____ Pronation ☐ ☐
 _____ Flat feet ☐ ☐
 _____ High arch ☐ ☐
 Knee & hip _____ Knock knees ☐ ☐
 _____ Bow legs ☐ ☐



Comments:

Lateral view

Upper body

Y N

Lumbar spine _____ Lordosis ☐ ☐
 _____ Flat ☐ ☐
 Thorac spine _____ Kyphosis ☐ ☐
 _____ Flat ☐ ☐
 Trunk _____ Rotation (symmetry) ☐ ☐
 Shoulders _____ Forward ☐ ☐
 Head position _____ Forward ☐ ☐
 _____ Back ☐ ☐

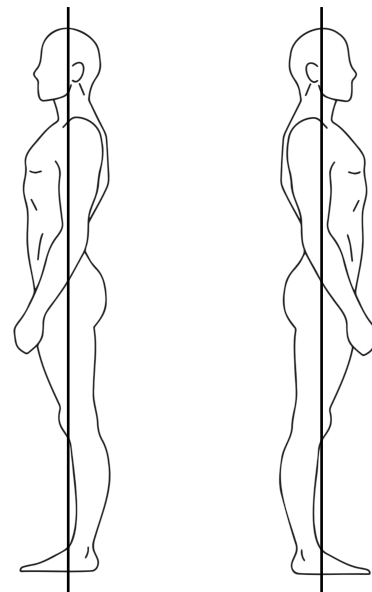
Lower body

L R

Ankle _____ Dorsiflexion ☐ ☐
 _____ Plantarflexion ☐ ☐
 Knee _____ Flexed ☐ ☐
 _____ Hyperextended ☐ ☐

Y N

Pelvic tilt _____ Symmetrical deviation? ☐ ☐
 _____ Tilt: anterior ☐ ☐
 _____ Posterior ☐ ☐



Comments: