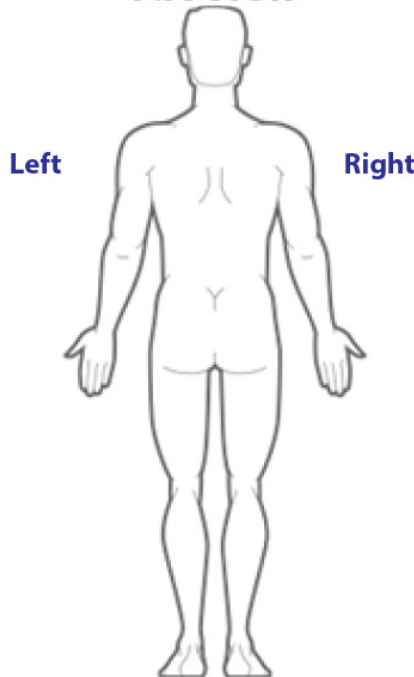


Pathway Assessment Form

Patient Name: _____
Height (cm): _____ **Date:** _____
Weight (kg): _____ **Age:** _____
Right Heel Lift (%): _____ **DOB:** _____
Left Heel Lift (%): _____ **B.M.I:** _____
Shoe Size: _____

P.A View



Leg Length (cm)
Right: _____
Left: _____

Right Innominate Inclination:
A.S ilium
P.I ilium
Ext/Int ilium

Left Innominate Inclination:
A.S ilium
P.I ilium
Ext/Int ilium

Pelvic Torsion =

| | | | | | |
|---|--------|---|---|---|---------|
| Functional Trial (With 9mm EVA board) Static | Right: | L | R | = | Torsion |
| | Left: | L | R | = | Torsion |

| | | | | | |
|--|--------|---|---|---|---------|
| Dynamic Functional Trial (9mm in-shoe raise) Therefore, Innominate Range | Right: | L | R | = | Torsion |
| | Left: | L | R | = | Torsion |
| | | L | R | | |

Look at the highest and lowest reading from the 8 to 10°+ve Normal range of inclination

HIGHEST READING (from the 10°+ve) = _____ The largest range from the normal helps to determine the pathway:
 LOWEST READING (from the 8°+ve) = _____