



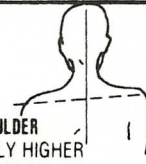
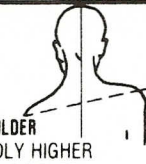
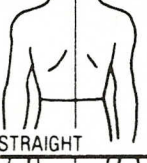
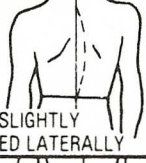





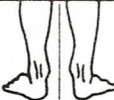

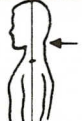


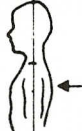





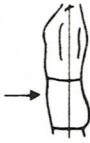
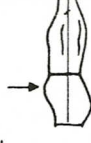
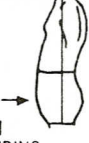
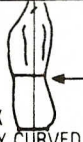
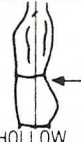
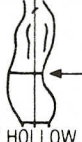


SPINAL SCORE SHEET

NAME _____
 ADDRESS _____ PHONE _____

EXCELLENT 100
 GOOD 95-100
 FAIR 60-95
 POOR 0-60
 EMERGENCY 0

	GOOD - 10	FAIR - 5	POOR - 0			
HEAD LEFT RIGHT	 HEAD ERECT GRAVITY LINE PASSES DIRECTLY THROUGH CENTRE	 HEAD TWISTED OR TURNED TO ONE SIDE SLIGHTLY	 HEAD TWISTED OR TURNED TO ONE SIDE MARKEDLY			
SHOULDERS LEFT RIGHT	 SHOULDERS LEVEL (HORIZONTALLY)	 ONE SHOULDER SLIGHTLY HIGHER THAN THE OTHER	 ONE SHOULDER MARKEDLY HIGHER THAN THE OTHER			
SPINE LEFT RIGHT	 SPINE STRAIGHT	 SPINE SLIGHTLY CURVED Laterally	 SPINE MARKEDLY CURVED Laterally			
HIPS LEFT RIGHT	 HIPS LEVEL (HORIZONTALLY)	 ONE HIP SLIGHTLY HIGHER	 ONE HIP MARKEDLY HIGHER			
ANKLES	 FEET POINTED STRAIGHT AHEAD	 FEET POINTED OUT	 FEET POINTED OUT MARKEDLY ANKLES SAG IN			
NECK	 NECK ERECT. CHIN IN LINE ABOVE SHOULDERS	 NECK SLIGHTLY FORWARD. CHIN SLIGHTLY OUT	 NECK MARKEDLY FORWARD CHIN MARKEDLY OUT			
UPPER BACK	 UPPER BACK NORMALLY ROUNDED	 UPPER BACK SLIGHTLY MORE ROUNDED	 UPPER BACK MARKEDLY ROUNDED			
TRUNK	 TRUNK ERECT	 TRUNK INCLINED SLIGHTLY TO REAR	 TRUNK INCLINED MARKEDLY TO REAR			
ABDOMEN	 ABDOMEN FLAT	 ABDOMEN PROTRUDING	 ABDOMEN PROTRUDING AND SAGGING			
LOWER BACK	 LOWER BACK NORMALLY CURVED	 LOWER BACK SLIGHTLY HOLLOW	 LOWER BACK MARKEDLY HOLLOW			
				TOTAL		

