POSTERIOR PELVIC TILT

Low or absent tone in the trunk muscles

Limited hip flexion Abnormal (high, low or fluctuating) tone in trunk and/or lower extremities Pathological reflexes in lower extremities or trunk

Decreased lordosis

Tight hamstrings Increased thoracic kyphosis Decreased pelvic/lumbar spine range of motion

Seat depth too long

Footplates too high (Thighs not loaded sufficiently) Footplates too low (Feet not loaded sufficiently) Seat-to-floor height too high for foot propulsion

Footplate position relative to knee does not accommodate tight hamstrings Wheelchair does not provide solid base of support (Sling

upholstery)

Back support too upright Armrests too low

Back does not support posterior pelvis



PELVIC **OBLIQUITY** Asymmetrical trunk muscle strength Asymmetrical muscle tone (trunk and/or lower extremities) Wheelchair too wide Asymmetrical soft tissue or muscle mass

Asymmetrical pelvic/femur bone structure Asymmetrical hip flexion

extremities)

Limited hip abduction and/or adduction Limited hip internal or external rotation Scollosis

Asymmetrical hip flexion

leg length discrepancy

No solid base of support

Armrests too low (Upper extremities not

supported)

Seat shape does not support trochanters Seat and or back does not provide enough lateral

pelvic support Footplate position and/or seating angles do not

support hip range limitations Joystick and/or wheel location inappropriate

PELVIC

Posterior dislocated or subluxed hip ROTATION

Unilateral foot propeller Limited hip abduction and / or adduction range of motion

Asymmetrical muscle tone (trunk and/or lower

Asymmetrical muscle mass in the posterior

Scoliosis plus or minus rotation and/or bony deformity

Trunk not supported

Back support does not support posterior pelvis Seat to floor height too high for foot

Wheel set up incorrect for hand propulsion

eat and or/or backrest contours too narrow



Tight hip flexors Tight quadriceps Tightened paraspinals Weakened abdominals Obesity Increased lumbar lordosis Anterior femoral angle (Knees lower than hips) Back support too upright

Excessive lumbar contour Trunk not supported

Clinical Assessment Goals

Improper positioning

cause any of the

postures described.

✓ Is it fixed or flexible?

segment.

Identify posture/orthopedic deformities at each body



With Reduced Lumbar Lordosis (Full C-Curve)

Low or absent muscle tone in the trunk Compensation for posterior tilted pelvis

Spinal fusion or structural spinal deformity Diminished head control Compensation for visual impairment

Back does not match shape of posterior trunk Back does not support posterior pelvis Back support too vertical

Back support too low Seat to back angle too open or closed Head support mounted too far forward or too

Arm supports too low

Diminished disc space in upper thoracic spine Hyper extended cervical spine Extreme hyper mobility Postural deterioration over time Diminished head control

Back support too low Arm support too low Wheel set up incorrect for hand propulsion Back does not match shape of posterior trunk Head support mounted too far forward or too

Seat to back angle too closed

Asymmetrical muscle tone or strength in the trunk

Compensation for pelvic obliquity and/or pelvic rotation

Structural spinal deformity Inability to hold the head in midline Collapsed lung

Decreased trunk balance Asymmetrical upper extremity strength during manual wheelchair propulsion

Back does not support posterior pelvis Back does not match shape of posterior trunk Back does not provide enough lateral support Seat cushion does not provide pelvic stability Wheelchair does not provide solid base of support (Sling upholstery) Upper extremity support is too low, too high or too

Not enough head support Joystick or wheel location inappropriate

SCOLIOSIS

INCREASED LUMBAR LORDOSIS With Thoracic Extension

Low or absent muscle tone in the trunk muscles Compensation for anterior tilted pelvis Tightened paraspinals

Hypermobiliy of lumbar spine Compensation for instability

Anterior femoral angle (knees lower than hips) Back too vertical Excessive lumbar contour Back support too low Posterior pelvic support too high Back does not match shape of posterior trunk Orientation in space not optimal (system too upright)



UPPER THORACIC

