



**Spinal Seating Professional Development Project  
Assessment Form AF2.3: Basic MAT Assessment**

POSTURE IN CURRENT SEATING SYSTEM				
ASSESSMENT FOR: <i>MR XY, T8 SCI, MVA.</i>			DATE:	Problems /Comments
Pelvis	<b>Tilt (Side View)</b>  <input type="checkbox"/> Neutral <input checked="" type="checkbox"/> Posterior <input type="checkbox"/> Anterior <i>noted psis on cushion surface</i>	<b>Obliquity (Frontal View)</b>  <input type="checkbox"/> Neutral <input type="checkbox"/> Left Lower <input checked="" type="checkbox"/> Right Lower <i>Lowered by: Approx 2"</i>	<b>Rotation (Top View)</b>  <input type="checkbox"/> Neutral <input type="checkbox"/> Left Forward <input checked="" type="checkbox"/> Right Forward <i>~ 1"</i>	
	<b>Anterior / Posterior</b>  <input type="checkbox"/> Neutral <input checked="" type="checkbox"/> Thoracic Kyphosis <input type="checkbox"/> Lumbar Lordosis <input checked="" type="checkbox"/> Lumbar C-Curve Flattening	<b>Scoliosis (Frontal View)</b>  <input type="checkbox"/> Neutral <input type="checkbox"/> Convex Left <input checked="" type="checkbox"/> Convex Right Apex at:	<b>Rotation (Top View)</b>  <input type="checkbox"/> Neutral <input type="checkbox"/> Left Forward <input checked="" type="checkbox"/> Right Forward	
Hips	<b>Thigh to Trunk Angle</b> Left: <i>~120</i> Degrees <input type="checkbox"/> Right: <i>~120</i> Degrees <input type="checkbox"/>	<b>Position (Frontal View)</b>  <input checked="" type="checkbox"/> Neutral <input type="checkbox"/> ABduct <sup>n</sup> L/R <input type="checkbox"/> ADduct <sup>n</sup> L/R <input type="checkbox"/> External Rotation: L/R <input type="checkbox"/> Internal Rotation: L/R	<b>Windswept (Frontal View)</b>  <input checked="" type="checkbox"/> Neutral <input type="checkbox"/> Left <input type="checkbox"/> Right	<b>Angles</b> Left:  Thigh-Trunk Thigh-Lower Leg Lower Leg-Foot Right:
	<b>Thigh-Lower Leg Angle</b> Left: <i>~80</i> Degrees <input type="checkbox"/> Right: <i>~80</i> Degrees <input type="checkbox"/>	<b>Lower Leg- Foot Angle</b> Left: <i>~90</i> Degrees <input type="checkbox"/> Right: <i>~90</i> Degrees <input type="checkbox"/> <input type="checkbox"/> Plantar-flex <input type="checkbox"/> Plantar-flex <input type="checkbox"/> Dorsi-flex <input type="checkbox"/> Dorsi-flex	<b>Foot Position</b> Left: <input checked="" type="checkbox"/> Neutral <input type="checkbox"/> Inversion <input type="checkbox"/> Eversion Right: <input checked="" type="checkbox"/> Neutral <input type="checkbox"/> Inversion <input type="checkbox"/> Eversion	
Head and Neck	<b>Cervical Curve (Side View)</b> <input type="checkbox"/> Neutral <input type="checkbox"/> Flexion <input type="checkbox"/> Extension <input checked="" type="checkbox"/> Cervical Hyperextension (Chin poke)	<b>Neck Position (Frontal View)</b> <input checked="" type="checkbox"/> Midline <input type="checkbox"/> Lateral Flexion: L/R <input type="checkbox"/> Rotation: L/R	<b>Control</b> <input checked="" type="checkbox"/> Independent Head Control and Full ROM <input type="checkbox"/> Restricted Head Control <input type="checkbox"/> Restricted ROM <input type="checkbox"/> Absent Head Control	
	<b>Shoulder positioning</b> <input type="checkbox"/> Level <input checked="" type="checkbox"/> Asymmetry <i>Lower</i>	<b>Elbow and Forearm Position</b> <input type="checkbox"/> Arm Support <input checked="" type="checkbox"/> No Support	<b>Wrist and Handgrip</b> <i>NAD.</i>	

Summary / Comments:

*Appt - seating review to improve posture presented, slump posture & recurving @ IT knees.  
Sits too low over the rear wheels -> shoulder pain. Client reported "collapse posture" last few years.*

Consent Obtained  
 Photo Taken



**Spinal Seating Professional Development Project Assessment Form AF2.3: Basic MAT Assessment**

SUPINE MAT ASSESSMENT																				
ASSESSMENT FOR: <b>MR XY</b>			DATE:	Problems /Comments																
Pelvis	<p><b>Tilt</b></p> <p><input type="checkbox"/> Neutral <input type="checkbox"/> Posterior <input checked="" type="checkbox"/> Anterior</p> <p><input type="checkbox"/> Fixed <input type="checkbox"/> Flexible <input type="checkbox"/> Corrects with Effort (to neutral / partial correction)</p>	<p><b>Obliquity</b></p> <p><input checked="" type="checkbox"/> Neutral <input type="checkbox"/> Left Lower <input type="checkbox"/> Right Lower</p> <p>Lowered by: <input type="checkbox"/> Fixed <input type="checkbox"/> Flexible <input type="checkbox"/> Corrects with Effort (to neutral / partial correction)</p>	<p><b>Rotation</b></p> <p><input checked="" type="checkbox"/> Neutral <input type="checkbox"/> Left Forward <input type="checkbox"/> Right Forward</p> <p><input type="checkbox"/> Fixed <input type="checkbox"/> Flexible <input type="checkbox"/> Corrects with Effort (to neutral / partial correction)</p>	<p><b>Kyphosis</b></p> <p>2" lordosis</p> <p>ribs more pronounced @ 90°</p>																
	<p><b>Anterior / Posterior</b></p> <p><input type="checkbox"/> Neutral <input checked="" type="checkbox"/> Thoracic Kyphosis <input checked="" type="checkbox"/> Lumbar Lordosis</p> <p><input type="checkbox"/> Lumbar C-Curve Flattening <input checked="" type="checkbox"/> Fixed <input type="checkbox"/> Flexible <input type="checkbox"/> Corrects with Effort (to neutral / partial correction)</p>	<p><b>Scoliosis</b></p> <p><input type="checkbox"/> Neutral <input type="checkbox"/> Convex Left <input checked="" type="checkbox"/> Convex Right</p> <p>Apex at: <b>mid thoracic - low ~ T8.</b></p> <p><input checked="" type="checkbox"/> Fixed <input type="checkbox"/> Flexible <input type="checkbox"/> Corrects with Effort (to neutral / partial correction)</p>	<p><b>Rotation</b></p> <p><input type="checkbox"/> Neutral <input type="checkbox"/> Left Forward <input checked="" type="checkbox"/> Right Forward</p> <p>Forwarded by: <input type="checkbox"/> Fixed <input checked="" type="checkbox"/> Flexible <input type="checkbox"/> Corrects with Effort (to neutral / partial correction)</p>																	
Lower Extremities	<p><b>Angles</b></p> <p><b>Range of Motion</b> OR <b>Reported Observations</b></p> <table border="1"> <thead> <tr> <th>Left</th> <th>Right</th> <th>Normal ROM</th> <th>Fixed / Flexible / Corrects with Effort, Tone / Spasm that may impact on seating posture.</th> </tr> </thead> <tbody> <tr> <td><b>90°</b></td> <td><b>90°</b></td> <td>Simulate 0° - 90°</td> <td></td> </tr> <tr> <td colspan="2"><b>~160° ~ 160°</b></td> <td>30° - 180°</td> <td></td> </tr> <tr> <td><b>Full ROM.</b></td> <td></td> <td>30° - 135°</td> <td></td> </tr> </tbody> </table>			Left	Right	Normal ROM	Fixed / Flexible / Corrects with Effort, Tone / Spasm that may impact on seating posture.	<b>90°</b>	<b>90°</b>	Simulate 0° - 90°		<b>~160° ~ 160°</b>		30° - 180°		<b>Full ROM.</b>		30° - 135°		<p>Left: Lower Leg-Foot</p> <p>Thigh-Lower Leg</p> <p>Thigh-Trunk</p> <p>Right: Lower Leg-Foot</p> <p>Thigh-Lower Leg</p> <p>Thigh-Trunk</p>
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	<b>~160° ~ 160°</b>		30° - 180°																	
	<b>Full ROM.</b>		30° - 135°																	
<p><b>Trunk-Thigh Angle:</b> Flex hip to 90° or a lesser angle till ASIS rolls / pelvic tilts</p>																				
<p><b>Thigh-Low Leg Angle:</b> With hip flex° at 90° or the trunk to thigh angle, extend knee from flexion till pelvis tilt / ASIS rolls.</p>																				
<p><b>Lower Leg-Foot Angle:</b></p>																				
<p><b>Hip Abduction / Adduction:</b> <b>flexible ROM</b></p>			<p><b>Hip External / Internal Rotation:</b> <b>flexible ROM</b></p>	<p><b>Foot Inversion / Eversion:</b> <b>flexible.</b></p>																
Head and Neck	<p><b>Cervical Curve</b></p> <p>Resting Posture</p> <p><input type="checkbox"/> Neutral <input checked="" type="checkbox"/> Cervical Flexion <input checked="" type="checkbox"/> Cervical Hyperextension</p>	<p><b>Lateral Flexion</b></p> <p>Resting posture:</p> <p><input checked="" type="checkbox"/> Neutral <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Fixed <input checked="" type="checkbox"/> Flexible <input type="checkbox"/> Corrects with Effort</p>	<p><b>Rotation</b></p> <p>Resting posture:</p> <p><input checked="" type="checkbox"/> Neutral <input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> Fixed <input checked="" type="checkbox"/> Flexible <input type="checkbox"/> Corrects with Effort</p>	<p><b>neck posture influenced by Kyphosis.</b></p>																
	<p><b>Shoulder PROM</b></p> <p><input checked="" type="checkbox"/> Level <input type="checkbox"/> Asymmetry</p>	<p><b>Elbow and Forearm PROM</b></p>	<p><b>Wrist and Hand</b></p> <p>Description:</p>																	

**Summary / Comments:**

Sitting in MWK posture is likely contributed by  
 1) scoliosis on @ - falls to @ → use pelvic obliquity @ lowered.  
 2) worn slung uphd slay - lack lordosis support.  
 Kyphosis over stretched upholstery  
 3) rib cage asymmetry → shoulder rotation  
 → poor propulsion stroke % L & R.

Consent Obtained  
 Photo Taken



Spinal Seating Professional Development Project Assessment Form AF2.3: Basic MAT Assessment

SITTING MAT ASSESSMENT				
ASSESSMENT FOR: MR XY, SCI T9			DATE:	SIMULATION & OUTCOME: (Describe direction and location of forces applied)
Balance: <input checked="" type="checkbox"/> Hands-free sitter <input type="checkbox"/> Hands dependant sitter			<input type="checkbox"/> *Dependant sitter* (* for advance clinician /specialist only)	
Pelvis	<b>Tilt (Side View)</b>  <input type="checkbox"/> Neutral <input checked="" type="checkbox"/> Posterior <input type="checkbox"/> Anterior for hands free	<b>Obliquity (Frontal View)</b>  <input type="checkbox"/> Neutral <input type="checkbox"/> Left Lower <input checked="" type="checkbox"/> Right Lower Lower by: ~ 0.5"	<b>Rotation (Top view)</b>  <input checked="" type="checkbox"/> Neutral <input type="checkbox"/> Left Forward <input type="checkbox"/> Right Forward	Accommodations / Corrections: PSIS support Outcomes: → ↓ posterior tilt to neutral tilt. ↓ Slump posture
	Trunk	<b>Anterior / Posterior</b>  <input type="checkbox"/> Neutral <input checked="" type="checkbox"/> Thoracic Kyphosis <input type="checkbox"/> Lumbar Lordosis <input type="checkbox"/> Lumbar C-curve Flattening <input checked="" type="checkbox"/> Fixed <input type="checkbox"/> Flexible <input type="checkbox"/> Corrects with Effort (to neutral / partial correction)	<b>Scoliosis (Frontal View)</b>  <input type="checkbox"/> Neutral <input type="checkbox"/> Convex Left <input checked="" type="checkbox"/> Convex Right Apex at: <input checked="" type="checkbox"/> Fixed <input type="checkbox"/> Flexible <input type="checkbox"/> Corrects with Effort (to neutral / partial correction)	<b>Rotation (Top view)</b>  <input checked="" type="checkbox"/> Neutral <input type="checkbox"/> Left Forward <input type="checkbox"/> Right Forward
Lower Extremities		<b>Initial Sitting Angles</b>  90 Thigh-Trunk 70 Thigh-Lower Leg	<b>Position (Frontal View)</b>  <input checked="" type="checkbox"/> Neutral <input type="checkbox"/> ABduct <sup>n</sup> L/R <input type="checkbox"/> ADduct <sup>n</sup> L/R <input type="checkbox"/> External Rotation: L/R <input type="checkbox"/> Internal Rotation: L/R	<b>Windswept (Frontal View)</b>  <input checked="" type="checkbox"/> Neutral <input type="checkbox"/> Left <input type="checkbox"/> Right
	Head and Neck	<b>Cervical Curve (Side View)</b> less chin poke.	<b>Neck Position (Frontal View)</b> neutral.	<b>Control</b>
Upper Limbs		<b>Shoulder Positioning</b> <input checked="" type="checkbox"/> Level <input type="checkbox"/> Asymmetry Describe:	<b>Elbow and Forearm Position</b> Describe:	<b>Hand and Wrist Positioning</b> Describe:

Summary / Comments: requires

- ① PSIS support
- ② lumbar space accommodation
- ③ support @ lateral to mid (lower thoracic)
- ④ build-out behind ① thorax to level shoulders.

Consent Obtained  
 Photo Taken