Postural Assessments

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Postural Assessment
Course Objectives

After completing the Postural Assessment course, the participant will:

1. Define Posture
2. Understand factors that can affect posture
3. Know when to perform a postural assessment on a client
4. Explain knowledge in the necessary equipment needed for a postural assessment as well as the time required
5. List the steps involved in a properly performed postural assessment
6. Describe the steps in performing posterior, lateral, anterior, and seated postural assessments
Postural Assessment
Course Examination

For each of the following questions, circle the letter of the answer that best answers the question.

1. When used in the context of therapy, the term “Postural Assessment” describes all of the following EXCEPT:
   A. The anatomical arrangement of our body
   B. The way we hold ourselves
   C. The relationship between various parts of the body
   D. How well our various parts fit together

2. Which statement is false concerning our postures?
   A. We rarely adopt the same posture in response to the same emotion
   B. Postures can give clues to new traumas
   C. Postures can give clues to old injuries
   D. Postures can correspond to various emotions

3. Which of the following is considered a pathological reason that can affect our posture?
   A. Pregnancy
   B. Scoliosis
   C. Osteomalacia
   D. Grief

4. The disadvantage to the belief that there is a “standard posture” is:
   A. It can lead to only looking at specific areas of the body and not how they are all connected and affect each other
   B. It means there are too many treatments to cover and that cannot be done in one session
   C. It only looks at the possibility of trauma causing the postural issue and no other causes
   D. It is ultimately not achievable with anyone

5. An excessive lordosis in the cervical area of the spine is usually combined with:
   A. Decreased kyphosis of the thoracic spine
   B. Increased kyphosis of the thoracic spine
   C. Decreased kyphosis of the lumbar spine
   D. Increased kyphosis of the lumbar spine

6. All are valid reasons to perform a postural assessment EXCEPT:
   A. Establish a baseline
   B. Save time in the therapies
   C. Acquire information
   D. Diagnose problems
7. A possible reason for someone without a history of trauma to the shoulder to have muscular atrophy of that area is:
   A. Shoulder separation
   B. Adhesive capsulitis
   C. Rotator cuff impingement syndrome
   D. Dislocation

8. Who should have a postural assessment?
   A. A client who needs a diagnosis of injury
   B. A client who would benefit from a different assessment
   C. A client unable to stand because of pain
   D. Sports or a basic massage

9. When is a postural assessment usually performed?
   A. After the treatment
   B. Before you have medical information
   C. Following the consultation
   D. As the client walks to your office

10. All of the following are useful tools to have when learning to perform postural assessments EXCEPT:
    A. A second therapist to help take notes
    B. A full-length mirror
    C. A warm, private room
    D. A model skeleton

11. Which type of skeleton is best to use when conducting a postural assessment?
    A. Skeleton with a base support
    B. Large skeleton
    C. Hanging skeleton
    D. Skeleton chart

12. All of the following are appropriate for the client to wear EXCEPT:
    A. No socks or shoes
    B. Disrobed to his underwear
    C. Hair tied up
    D. Sports bra for women

13. What is the name for the “line of gravity”?
    A. Plumb line
    B. Midline
    C. Median
    D. Axis

14. Which statement is false concerning the standard posterior alignment?
    A. The palms of the hands should be facing the sides of the body
    B. The shoulder of the non-dominant hand may be lower than the shoulder of the dominant hand
    C. Calf bulk should be equal for the left and right leg
    D. The feet should be turned out slightly

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15. When using the plumb line in the standard lateral posture, it should be:
   A. Against the earlobe
   B. Slightly anterior to the lateral malleolus
   C. Vertically through most of the cervical vertebrae
   D. Through the bodies of the lumbar vertebrae

16. The human center of gravity is located:
   A. In the chest
   B. At the belly button
   C. Anterior to S2
   D. In line with T12

17. If the scapula is protracted and the head appears to be in the “wrong” place, what might the real problem be?
   A. The head is too far forward
   B. The cervical vertebrae are straight (military neck) and not natural lordotic curve
   C. The head is slightly rotated
   D. The scapula is out of alignment

18. How many steps are involved in the posterior postural assessment?
   A. 14
   B. 17
   C. 31
   D. 142

19. How long does it normally take an experienced practitioner to complete an entire postural assessment?
   A. 14-17 minutes
   B. 5-10 minutes
   C. 1-3 minutes
   D. The entire first session with the client

20. If the head is tilted to the right, what muscle is NOT tight?
   A. The right middle trapezius muscle
   B. The right levator scapula muscle
   C. The right scalene muscles
   D. The right upper trapezius muscle

21. If your client has torticollis, they will exhibit:
   A. Slight flexion of the head
   B. Lateral flexion of the head
   C. Left rotation of the head
   D. Right rotation of the head

22. What structure is superficial to the cervical vertebrae?
   A. Ligamentum nuchae
   B. Anterospinal ligament
   C. Transverse processes
   D. Aponeurosis
23. How do you know if a shoulder is higher than the other rather than the opposite shoulder is lower?
   A. The client has had a stroke
   B. If the head is tilted to the opposite side
   C. If the shoulder is showing winging
   D. By realizing it is easier to elevate the shoulder than to depress it

24. For most individuals, the dominant arm is typically
   A. Depressed and slightly protracted
   B. Depressed and slightly retracted
   C. Elevated and slightly protracted
   D. Elevated and internally rotated

25. When a client is not using his shoulder due to injury, which two muscles are typically atrophied?
   A. Supraspinatus and infraspinatus
   B. Subscapularis and infraspinatus
   C. Pectoralis major and supraspinatus
   D. Teres minor and subscapularis

26. Who may have unilateral shortness in the rhomboids on one particular side?
   A. Rock climbers
   B. Rowers
   C. Pole vaulters
   D. Accountants

27. All of the following muscles are lengthened during downward rotation of the scapula EXCEPT:
   A. Rhomboid minor
   B. Upper trapezius
   C. Rhomboid major
   D. Serratus anterior

28. When the scapula is elevated, what else is also elevated?
   A. Inferior angle
   B. Rib cage
   C. Cervical vertebrae #7
   D. The floating ribs

29. Upward rotation of the scapula describes movement of the:
   A. Coracoid process
   B. Medial border of the scapula
   C. Superior angle
   D. Glenoid fossa

30. An upwardly rotated scapula will be:
   A. Abducted at the superior angle
   B. Adducted at the superior angle
   C. Adducted at the inferior angle
   D. Neutral at both angles

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31. When the scapula is “winged”, what muscle is weak?
   A. Serratus posterior
   B. Serratus anterior
   C. Rhomboid major and minor
   D. Middle fibers of trapezius

32. If the left scapula appears more prominent than the right, and also closer to the observer, then:
   A. The left scapula is higher than the right
   B. The trunk is rotated clockwise
   C. The trunk is lateral flexed on the left side
   D. The trunk is rotated counterclockwise

33. All of the following are shortened muscles when the trunk is rotated to the left EXCEPT:
   A. Right external oblique
   B. Right psoas
   C. Right internal oblique
   D. Left internal oblique

34. If the right humerus is internally rotated, all of the following are shortened EXCEPT:
   A. Right pectoralis minor
   B. Right teres major
   C. Right subscapularis
   D. Right pectoralis major

35. When the client is showing a curvature to one side in the spine when viewing the client from the posterior view, this indicates all of the following EXCEPT:
   A. Scoliosis
   B. Anterior pelvic tilt
   C. Muscle spasm
   D. Disc herniation

36. When the client has a pelvis that is raised on the right, they may have:
   A. an overly tight left quadratus lumborum
   B. increased lateral flexion of lumbar spine towards the left
   C. an abducted right hip
   D. increased lateral flexion of lumbar spine towards the right

37. The iliac crest is roughly level with the:
   A. 4th lumbar vertebrae
   B. Coccyx
   C. Sacrum
   D. 5th lumbar vertebrae

38. Besides using the iliac crest, what else can be used to determine if a client has a high hip?
   A. If the ASIS is lower than the PSIS
   B. If the client has one hip further away from the wall than the other
   C. Internal rotation of the hips
   D. The PSIS on both the left and right side
39. What is tight when a client is rotated away from you on the left (clockwise)?
   A. Left rectus abdominus
   B. Left internal oblique
   C. Left external oblique
   D. Right erector spinae

40. If your client’s knees appear level, but the left hip appears high, they may have:
   A. Longer right tibia
   B. Longer left tibia
   C. Longer right femur
   D. Longer left femur

41. If there is a protrusion at the knee, this is most likely:
   A. Bursitis
   B. Torn meniscus
   C. A hyperextended knee
   D. A tight popliteus muscle

42. All of the following are shortened if the calf line appears medial EXCEPT:
   A. Sartorius
   B. Pectineus
   C. Gluteus minimus
   D. Quadratus femoris

43. If the Achilles line curves towards each ankle (medially) the ankle is:
   A. Normal
   B. Calcaneovarus
   C. Calcaneovalgus
   D. Supinated

44. Excessive eversion of the ankle is often referred to as:
   A. Pes planus
   B. Pes cavus
   C. Oversupination
   D. Overpronation

45. If the medial malleolus of one foot appears higher than the medial malleolus of the other foot, the client may have:
   A. Pes varus
   B. Pes valgus
   C. Pes cavus
   D. Pes planus

46. All of the following muscles are lengthened and weak when the foot is in pes valgus EXCEPT:
   A. Fibularis
   B. Tibialis posterior
   C. Flexor hallucis longus
   D. Tibialis anterior
47. How many steps are performed when conducting a lateral position assessment?
A. 6
B. 8
C. 15
D. 14

48. If a client has a forward head position:
A. The levator scapula is tightened
B. The cervical extensors are tightened
C. The cervical extensors are lengthened
D. The cervical erector spinae is tightened

49. A reduced thoracic cavity is associated with:
A. Shortened intercostals muscles
B. Shortened abductors of the shoulder
C. Shortened external rotators of the shoulder
D. Shortened teres minor

50. When the cervical spine looks unusually flat, this indicates:
A. Short neck extensors
B. Short neck flexors
C. Disc herniation
D. Torticollis

51. Who typically gets a dowager’s hump?
A. Those with a forward head and no other problems
B. Postmenopausal women with osteoporosis
C. Those with a disc herniation at C7
D. Those with kyphosis of the lumbar area

52. Which statement is true regarding shoulder protraction?
A. The rhomboids are weak
B. The intercostals are shortened
C. The middle trapezius is tight
D. The lower trapezius is tight

53. A “military” type posture is associated with:
A. A lordotic curve in the cervical spine
B. Lengthened rhomboids
C. Lengthened middle trapezius
D. Parts of the pectoralis major is lengthened

54. Which statement is false concerning the thorax area?
A. In some clients, the normal curve in this area is so reduced, it gives the appearance of a flat upper back
B. Exaggerated thoracic curves are commonly seen in the sedentary
C. If you can see the spinous processes it means they have kyphosis
D. The lateral view is the best way to view abnormalities for kyphosis
55. A decreased kyphotic curve is observed in clients with:
   A. Hypomobility syndromes
   B. Hypermobility syndromes
   C. Neck and shoulder pain
   D. Shallow breathing

56. An increased lordotic curve in the lumbar spine may indicate:
   A. An anterior pelvic tilt
   B. A posterior pelvic tilt
   C. A lateral pelvic tilt
   D. A high hip

57. Muscles that may be lengthened with increase lumbar lordosis include all of the following EXCEPT:
   A. Hamstrings
   B. Gluteus maximus
   C. Rectus femoris
   D. Rectus Abdominus

58. An anterior pelvic tilt is when:
   A. The PIIS is positioned anterior to the pubis
   B. The AIIS is positioned anterior to the pubis
   C. The PSIS is positioned anterior to the pubis
   D. The ASIS is positioned anterior to the pubis

59. If the client has difficulty anteriorly tilting the pelvis, this could be because:
   A. She is already anteriorly tilted
   B. She is posteriorly tilted and cannot move the pelvis in the other direction
   C. Her hamstrings are too tight
   D. She has a herniated disc

60. Which statement is false concerning a posterior pelvic tilt?
   A. The ASIS is posterior to the pubis
   B. The extensors of the lumbar spine are lengthened
   C. The hip extensors are shortened
   D. The hip flexors are lengthened

61. When you are viewing your client from the lateral view, and you can see more of the popliteal area on one leg than the other, this may be signs of:
   A. A rotated tibia
   B. A rotated femur
   C. A hyperextended knee
   D. A shorter lower leg

62. Which of the following is false concerning a posture showing flexed knees?
   A. The quadriceps are weak
   B. The hamstrings are tight
   C. The soleus muscle is tight
   D. The popliteus muscle is tight

63. What pathology may inhibit full extension of the knee?
   A. Chondromalacia
   B. Tight hamstrings
   C. Torn ligament
   D. Pre-patellar bursitis
64. What condition may contribute to anterior knee pain in a client with hyperextended knees?
   A. Tight biceps femoris
   B. Tight psoas
   C. Tight hamstrings
   D. Tight quadriceps

65. Which issue may contribute to an increased likelihood of degenerative changes to the patellofemoral joint?
   A. Hyperextended knees
   B. Increased hip flexion
   C. Stretched quadriceps
   D. Increased pressure on the knee joints

66. Increased dorsiflexion of the ankle can involve all of the following EXCEPT:
   A. Shortened anterior tibialis muscle
   B. Early degenerative changes in the ankle joint
   C. Increased pressure on the anterior knee joint
   D. Increased pressure on the anterior aspect of the ankle retinaculum

67. Problems with which toe can be a huge contributing factor to balance problems?
   A. 3rd toe
   B. 2nd toe
   C. Pinky toe
   D. Big toe

68. What is edematous feet?
   A. A missing toe
   B. Edema in the feet
   C. Nerve damage
   D. Lack of oxygen

69. When is it best to perform the anterior view when conducting an assessment?
   A. Last
   B. First
   C. 3rd view
   D. It does not matter

70. How many steps are involved when conducting the anterior view assessment?
   A. 25
   B. 13
   C. 11
   D. 24

71. When conducting the anterior view, the nose should fall in line with all of the following EXCEPT:
   A. Umbilicus
   B. Manubrium
   C. Mouth
   D. Sternum
When assessing whether neck muscles are more prominent than others on one side verses the other, special attention should be paid to all of the following EXCEPT:

A. Upper trapezius  
B. SCM  
C. Scalenes  
D. Occipital

Which muscle might be more prominent in those with COPD?  

A. Upper trapezius  
B. Pectoralis minor  
C. SCM  
D. Scalenes

A ruptured acromion-clavicular joint may present itself with  

A. Sharply angled clavicles  
B. Bursitis  
C. Bruising of the shoulder joint  
D. Uneven contours of the clavicle

Depression of the shoulder plus indentation in the contour of the deltoid is observed in clients with:  

A. Subluxed shoulder  
B. Bursitis of the shoulder  
C. Fractured clavicle  
D. Separated shoulder

An internally rotated humerus can contribute to impingement of:  

A. Short head of the biceps brachii  
B. Long head of the biceps brachii  
C. Long head of the triceps brachii  
D. Short head of the triceps brachii

All of the following can contribute to shifts in the chest EXCEPT:  

A. Scoliosis  
B. Sciatica  
C. Lordosis  
D. Muscle imbalances

The normal carrying angle of the elbow for females is:  

A. 5 degrees  
B. 10-15 degrees  
C. 5-10 degrees  
D. 20 degrees

Swollen and inflamed joints of the wrist and hands may indicate:  

A. Osteoarthritis  
B. Rheumatoid arthritis  
C. Diabetes  
D. Nerve damage

Rotation of the umbilicus to the left may be caused by:  

A. A tight right iliopsoas  
B. A tight left iliopsoas  
C. A anterior pelvic tilt  
D. A posterior pelvic tilt
81. All of the following are true concerning a high right hip EXCEPT:
   A. The right quadratus lumborum will be tighter than the left
   B. The ASIS will be high on the right side
   C. The left hip will be adducted
   D. The right hip will be adducted

82. Which statement is false concerning assessment of the pelvis?
   A. A normal pelvis will have foot pressure on both the medial and lateral sides
   B. When the whole pelvis is rotated left, the knees face forward
   C. When the whole pelvis is rotated right, the pressure on the foot will be on the lateral side of the right foot
   D. When the whole pelvis is rotated to the left, the pressure on the foot will be on the lateral side of the left foot

83. Why might a client stand in a wide stance?
   A. Because they have tight hip adductors in relation to the hip abductors
   B. In order to feel better balanced
   C. Because they have a high hip
   D. Because they are anteriorly tilted

84. Atrophy in muscles in a healthy person may indicate:
   A. Diabetes
   B. Nerve damage
   C. Injury
   D. Disuse

85. All of the following correspond with genu valgum EXCEPT:
   A. Bow legs
   B. Shortened ITB
   C. Weakened gracilis
   D. Increased pressure on the lateral side of the knee

86. What can occur when the patella is tilted by force or prolonged knee extension?
   A. Anterior knee pain
   B. Genum valgum
   C. Genum varum
   D. Tight gracilis

87. What bony landmark is good to use in order to determine possible tibial torsion?
   A. Tibial malleolus
   B. Tibial condyle
   C. Tibial tuberosity
   D. Patella

88. Which statement is false concerning the Q-angle?
   A. It is measured by the angle between the rectus femoris and the patellar tendon
   B. It can help predict the likelihood of some knee problems
   C. It may indicate the need for an orthotic
   D. It may indicate the need for a prosthetic device
89. What is considered to be a normal Q-angle?
A. 15-20 degrees or less
B. 15-20 degrees or more
C. 0 degrees
D. 30 degrees

90. Which statement is false concerning medial tibial torsion?
A. Pronation is increased
B. The heel is inverted
C. The medial longitudinal arch is decreased
D. The heel is everted

91. Which is not indicative of external hip rotation?
A. Tight gluteus maximus
B. Tight gluteus medius posterior fibers
C. Tight gluteus minimus anterior fibers
D. Tight ITB

92. Which statement is false concerning pes cavus?
A. Trunk rotation to the left increases supination on the left foot
B. The calcaneus is supinated
C. The longitudinal arch is high
D. The foot is supinated

93. Which statement is false concerning pes planus?
A. The sole of the foot has lengthened muscles
B. It is also known as high arches
C. The ligaments of the foot are stretched
D. Trunk rotation to the left increases pronation on the right foot

94. Which body type is considered a “stocky” build?
A. Endomorphs
B. Ectomorphs
C. Mesomorphs
D. Mayomorphs

95. Which statement is true concerning seated postural analysis?
A. It is helpful for those in wheelchairs
B. It is helpful to provide a workstation analysis
C. It provides a true analysis for someone in a wheelchair
D. Anyone can be an ergonomist

96. Muscles shortened when the client is seated and laterally flexed to the right include:
A. Left SCM, right scalenes, right levator scapulae
B. Left levator scapulae, right upper trapezius, right SCM
C. Levar scapula, upper trapezius, and SCM bilaterally
D. Right levator scapulae, right upper trapezius, right SCM

97. Which muscles are shortened in individuals who rest the left arm on the car window while driving?
A. The right supraspinatus and middle deltoid
B. The left teres major and latissimus dorsi
C. The left latissimus dorsi and middle deltoid
D. The left supraspinatus and middle deltoid

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98. Which two muscles are lengthened when sitting with the hips abducted for a long time?
A. Gluteus maximus and gluteus minimus
B. Gluteus minimus and gluteus medius
C. Gluteus maximus and gluteus medius
D. Gluteus minimus and gracilis

99. What occurs when individuals wrap their feet around the legs of a chair?
A. The fibularis muscles and lengthened
B. The hips are externally rotated
C. The hips are internally rotated
D. The knees are in a varus position

100. Which of the following occurs when one leg is crossed over the other while sitting?
A. The pelvic tilt increases
B. The hip flexors become shortened
C. The lumbar spine is neutral
D. They maintain an upright posture