

report | Running Analysis



YOUR LOGO

PATIENT DETAILS	
NAME	
AGE (Yrs.)	
WEIGHT (kg)	
HEIGHT (ft)	
GENDER	
CLINICIAN	
DATE	

KINEMATIC DATA

GaitON's running analysis protocol highlights any abnormal joint motion during the running gait cycle.

LATERAL VIEW

INITIAL CONTACT <i>(Parameters assess shock absorption capability of the stance phase leg)</i>			
Parameter	Right	Left	Reference Value
Knee Angle ^a	159.7°	168.7°	<160°
Leg Inclination Angle ^b	(-) 3.3°	(-) 10.1°	± 5° from the vertical
MID STANCE <i>(Parameters assess the weight bearing strength of the stance phase leg)</i>			
Knee Angle ^a	137.1°	144.4°	<140°
Knee-Toe Alignment ^c	(+) 4.6°	(+) 3.8°	0°
PUSH OFF <i>(Parameters assess the ability of the stance phase leg to propel the body forward)</i>			
Ankle Plantarflexion ^d	123.2°	110.3°	110° to 120°
Hip Extension ^e	(-) 16.1°	(-) 17.8°	(-) 16° to (-) 25°
MID FLOAT <i>(Parameters assess the net vertical movement of the COM during the gait cycle)</i>			
COM Vertical Excursion	7.72 cm	8.1 cm	6 cm to 10 cm

Normal Values

POSTERIOR VIEW

MID STANCE			
Parameter	Right	Left	Reference Value
Rear Foot Angle ^f	(+) 22.9°	(+) 11.2°	Neutral: (+) 9° to (+) 13°
Pelvic Drop ^g	(+) 8.3°	(+) 7.2°	0° to (+) 5° for males 0° to (+)7° for females
Trunk Side Bend ^h	(+) 7.3°	(+) 7.9°	± 5° from the vertical

ANTERIOR VIEW

MID STANCE			
Parameter	Right	Left	Reference Value
Knee Ab/Adduction ⁱ	(+) 0.1°	(-) 6.9°	0°

Detect asymmetries by comparing right and left leg values

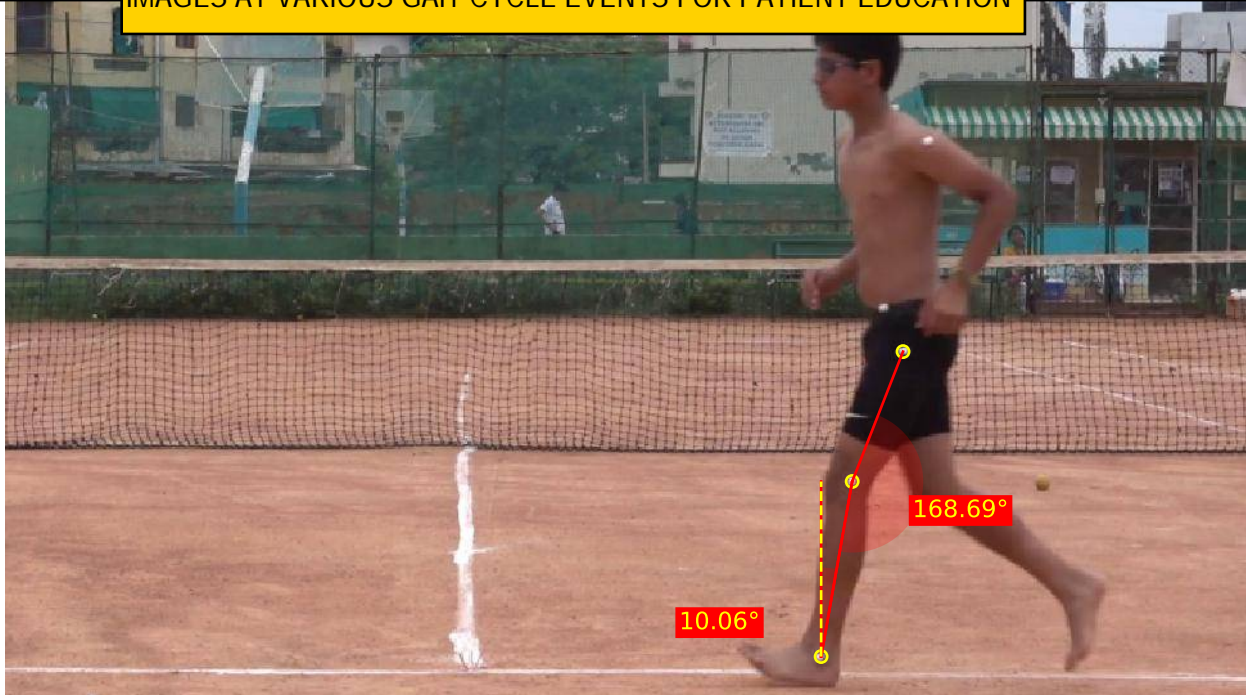
- Knee angle > 180 denotes hyperextension while knee angle < 180 denotes flexion.
- Flexed tibia is shown as [+] and extended tibia is shown as [-].
- Knee Toe Alignment is shown as [+] when knee is ahead of the toes and [-] when knee is behind the toes
- Ankle angle > 90 denotes plantarflexion while ankle angle < 90 denotes dorsiflexion.
- Hip flexion is shown as (+) and hip extension is shown as (-).
- Rear foot Eversion is denoted as (+) and Rear foot inversion is denoted as (-). Reference values as follows:
Underpronation: (+)3° to (+)8.9°.
Overpronation: (+)13° to (+)18°.
Severe Overpronation: >(+)18°.
- Contralateral pelvic drop is shown as (+) while ipsilateral pelvic drop is shown as (-).
- Ipsilateral trunk flexion is shown as (+) while Contralateral trunk flexion is shown as (-).
- Knee Ab/Adduction is [+] when patella is medial to the 2nd toe and [-] when patella is lateral to the 2nd toe.

INITIAL CONTACT | Lateral View

Instant at which the foot first makes contact with the ground.

IMAGES AT VARIOUS GAIT CYCLE EVENTS FOR PATIENT EDUCATION

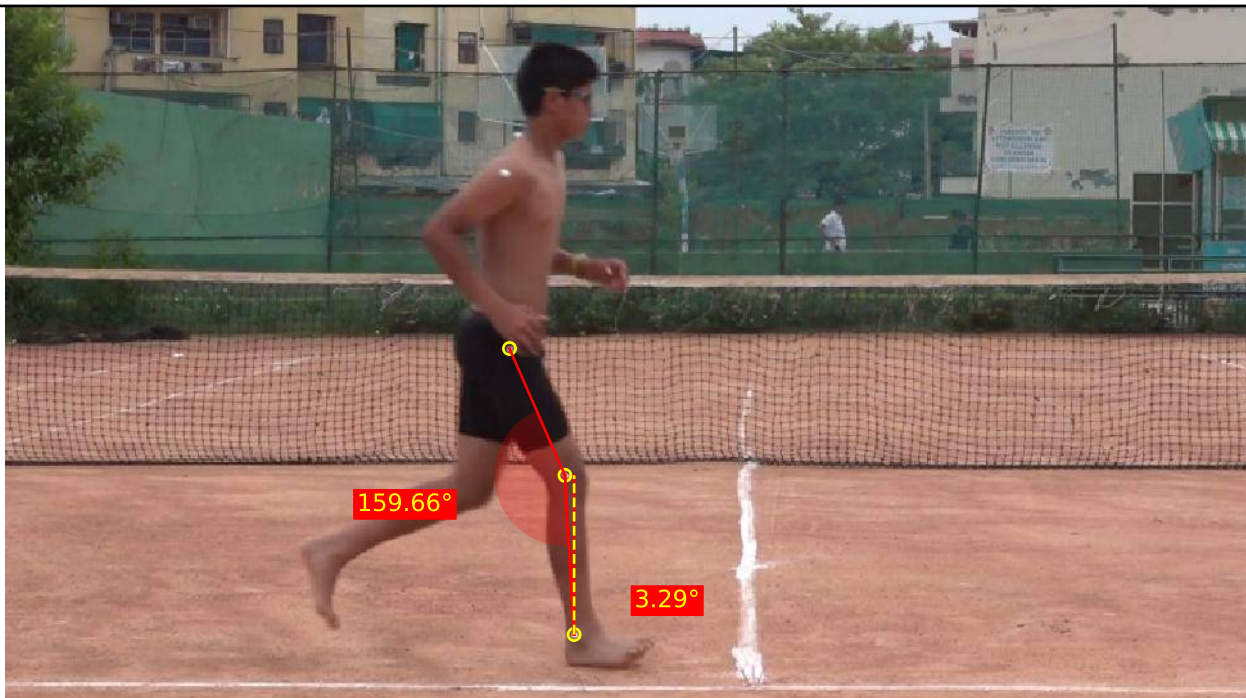
Left



Left Knee flexes less than normal at Initial Contact (Major Deviation).
Left Tibia Inclination is in an extended orientation & outside the normal range at Initial Contact (Major Deviation).

Automatic Notes

Right



Right Knee flexion is adequate at Initial Contact.
Right Tibia inclination is fairly vertical & in the normal range at Initial Contact.

Automatic Notes

MID STANCE | Lateral View

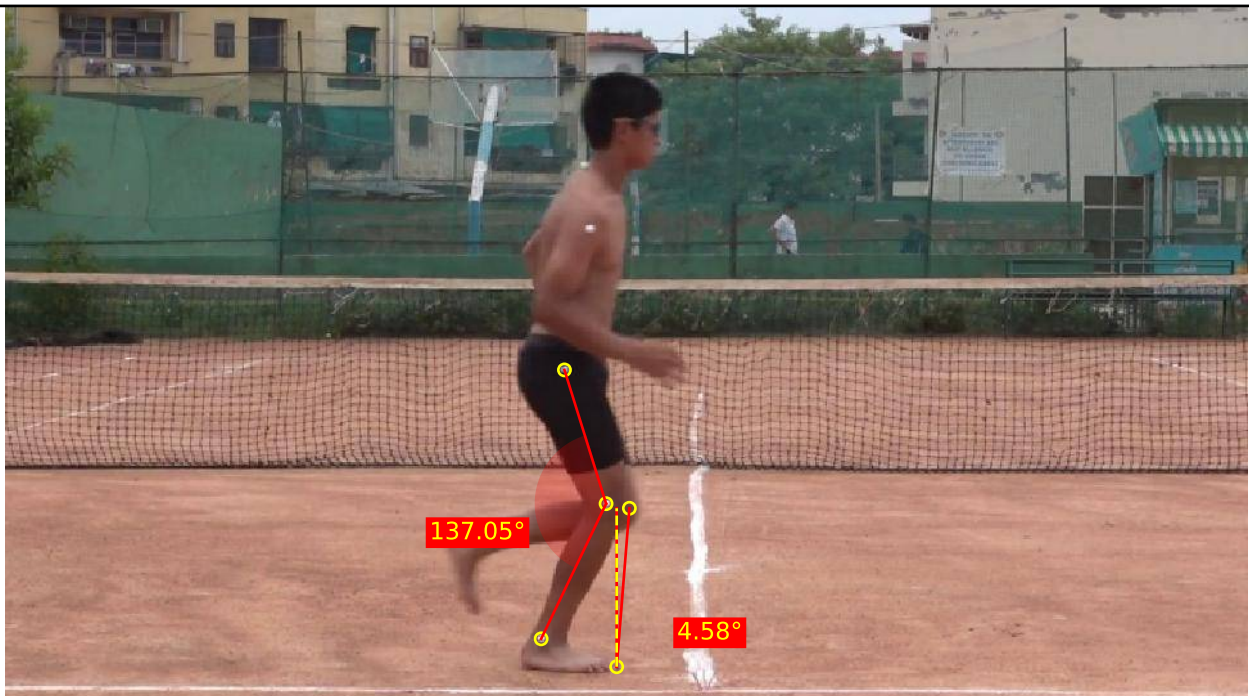
Instant when the body's center of mass (COM) is directly over the foot

Left



Left Knee flexes less than normal at Mid Stance (Minor Deviation).
Left Knee is anterior to the toes at Mid Stance (Minor Deviation).

Right

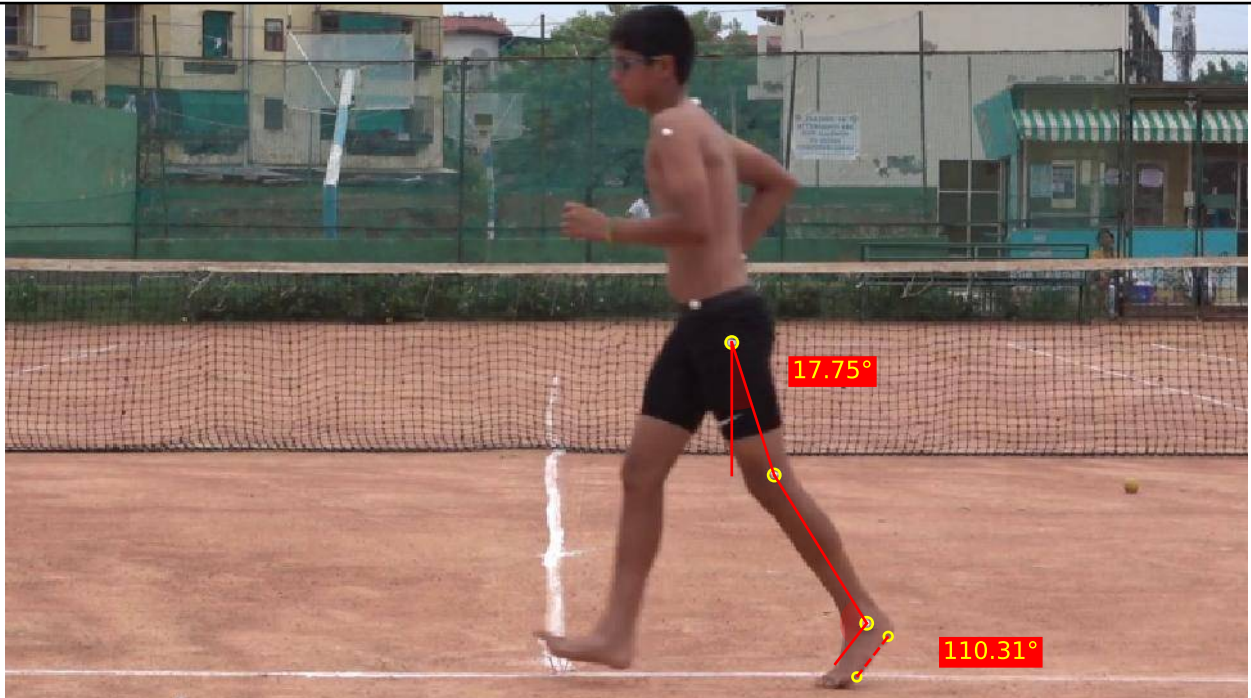


Right Knee flexion is adequate at Mid Stance.
Right Knee is anterior to the toes at Mid Stance (Minor Deviation).

PUSH OFF | Lateral View

Instant at which the toe leaves the ground.

Left



Left Hip Extension is adequate at Push Off.
Left Ankle Plantarflexion is adequate at Push Off.

Right

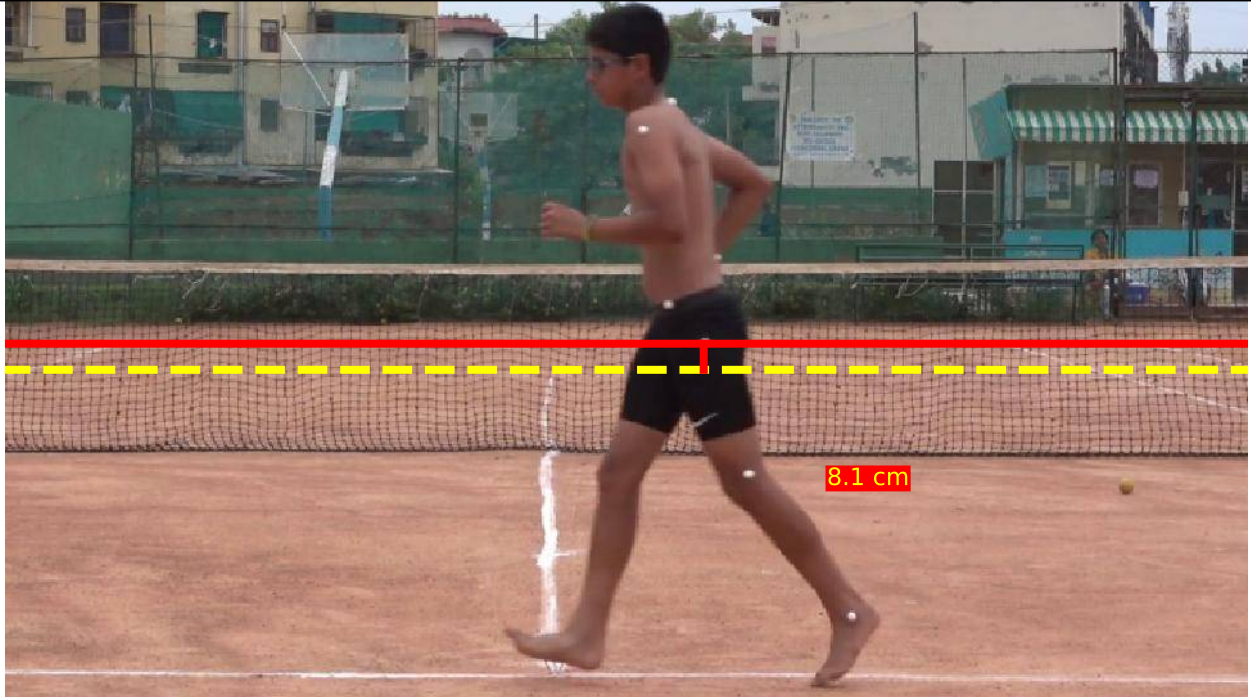


Right Hip Extension is adequate at Push Off.
Right Ankle plantarflexes more than normal at Push Off (Minor Deviation).

MID FLOAT | Lateral View

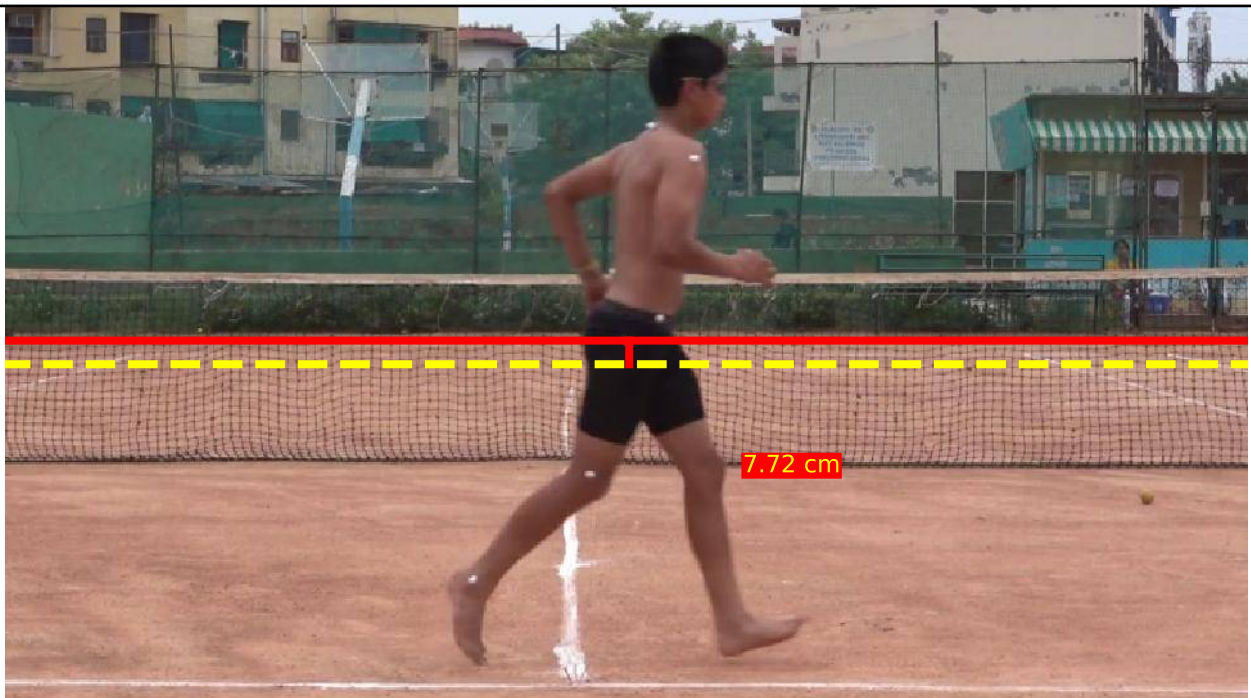
Instant when the body's COM is at the highest vertical position in the gait cycle.

Left



COM Vertical Excursion is in the generally acceptable range of 6-10 cm.

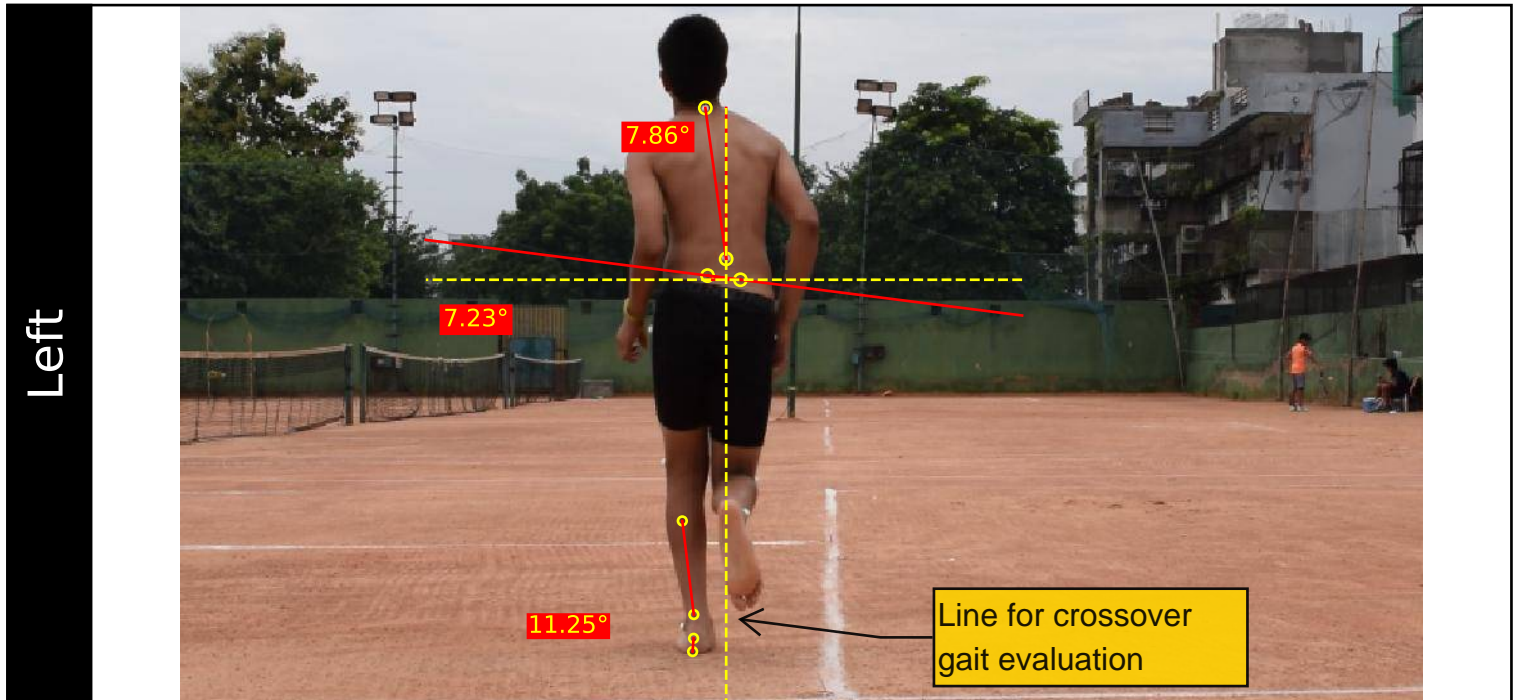
Right



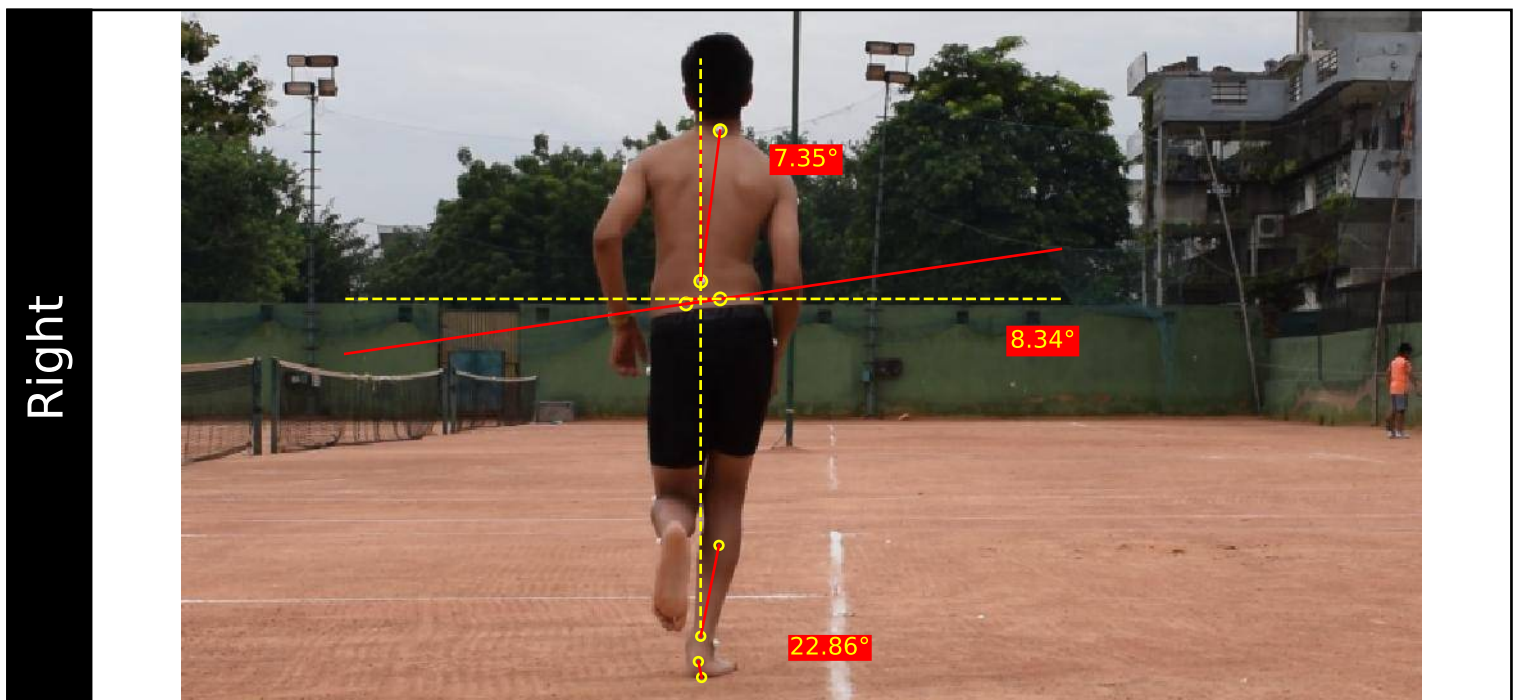
COM Vertical Excursion is in the generally acceptable range of 6-10 cm.

MID STANCE | Posterior View

Instant when the body's center of mass (COM) is directly over the foot.



Excessive Ipsilateral Trunk Lean present at Mid Stance (Minor Deviation).
Contralateral Pelvic Drop is excessive at Mid Stance (Minor Deviation).
Left Rearfoot Eversion is adequate at Mid Stance.



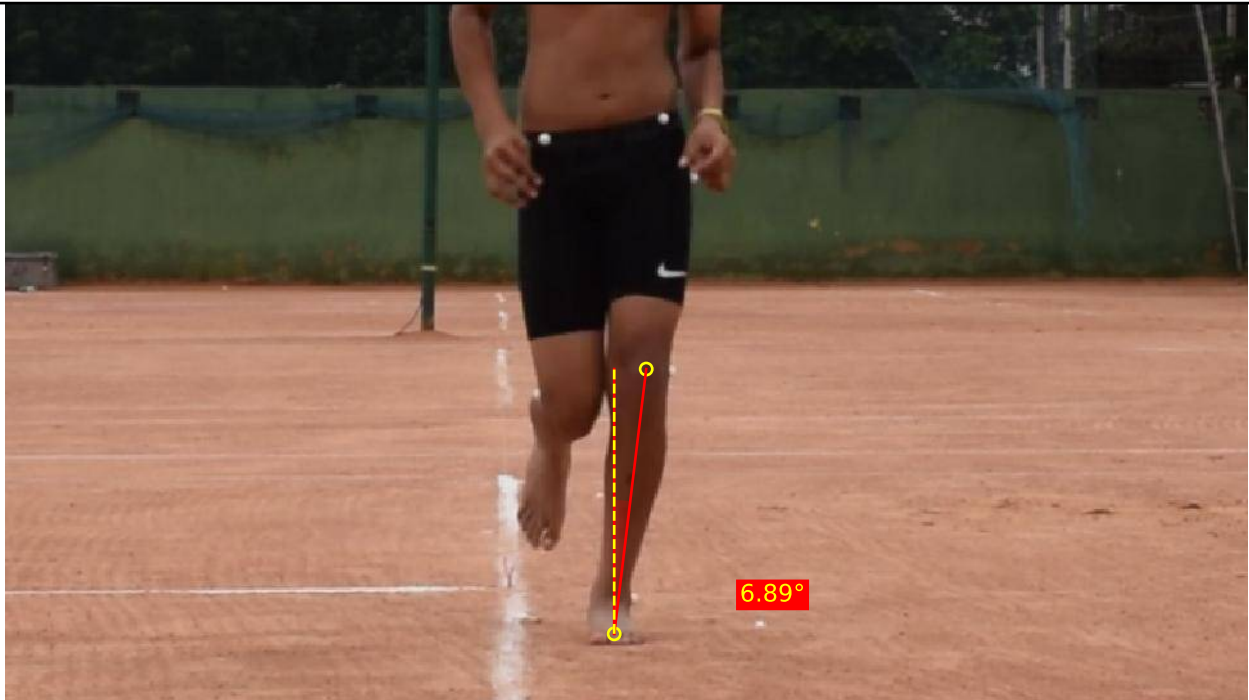
Excessive Ipsilateral Trunk Lean present at Mid Stance (Minor Deviation).
Contralateral Pelvic Drop is excessive at Mid Stance (Minor Deviation).
Right Rearfoot everts more than normal at Mid Stance (Major Deviation).

Automatic Notes

MID STANCE | Anterior View

Instant when the body's center of mass (COM) is directly over the foot.

Left



Center of Left Patella is lateral to the second toe (Major Deviation).

Right



Center of Right Patella is medial to the second toe (Minor Deviation).

Anterior Pelvic Tilt

It is also possible to measure additional data apart from the the inbuilt gait analysis protocol



Anterior Pelvic Tilt within normal range

Trunk Lean

