Musculoskeletal – Cervical Spine – Physical Exam Checklist Learnpediatrics.com - Written by Dr. R. Acedillo

EXAMINATION	OSCE ITEMS	
STANDING	 Inspection Standing posture (symmetry, midline, etc) Anterior (trachea, masses, face) Side (head posture, cervical lordosis, thoracic kyphosis) Posterior (level shoulders, scapula, muscle) Muscle wasting/asymmetry Supraspinatus/infraspinatus Deltoid, biceps, triceps Thenar, hypothenar Interosseus Screen Joint Above/Below Active ROM TMJ active range of motion Shoulder active ROM (see shoulder) 	 Gait Patient walks (myelopathy, wide-based, clumsiness, slow speed, stiff legs) Walk on toes (may catch subtle weakness) Walk on heels Active ROM Flexion (chin to within 2 fingerbreadths of chest) Extension (bridge of nose parallel to floor) Rotation (70-80° each way) Lateral rotation (70° each way)
SITTING	 Neurological - Upper Extremity Sensory Strength Reflexes (biceps, triceps, Brachioradialis) Special Tests Spurling's test (cervical nerve root compression, extend neck, turn to affected side, axial load if necessary) 	 Neurological □ Tone (elbows and wrists, clonus, fasiculations, rigidity, spasticity, etc) □ Vibration and proprioception (dorsal columns) □ Adson test (abduct, extend, externally rotate shoulder → pt takes deep breath and looks to ipsilateral side, decrease in pulse = thoracic outlet syndrome)
SUPINE	 Anterior Hyoid (C3) Thyroid cartilage (C4, 5) Cricoid ring (C6) Sternocleidomastoid muscles Carotid pulse Cervical lymph nodes Passive ROM Never do this in setting of trauma Flexion, extension, rotation, lateral flexion, et 	Posterior Mastoid process Transverse process of C2 Spinous process (C7, T1) Paraspinal muscles Nuchal line/inion