## Annex No. 25 to Order No. 834H by the Ministry of Health of the Russian Federation dated December 15, 2014

### **Information Leaflet Form No. 1**

### INITIAL OSTEOPATHIC EXAMIMATION

1. Date: dayn	onthyear	<u></u>	
2. Complaints on first visit:			
□ musculoskeletal system dysfunction		□ respiratory syste	em dysfunction
□ gastrointestinal system dysfunction		□ urinary and geni	ital system dysfunction
□ cardiovascular system dysfunction		□ pain syndrome	
Additional information:			
3. Somatic status:			
3.1. Overall condition: □ fair	□ poor □	severe	□ critical
3.2. Body type: □ normosther	ic □ hypersthenic	□ asthe	enic
3.3. Skin: □ clear □ r	sh □ wet □	dry □ excoria	nted
3.4 Mucous membranes: □ clear	□ rash □ wet	□ dry	
3.5 Breathing: □ puerile □ v	esicular □ stiff □ de	creased; crackle	es: □ none □ wet □ dry
3.6. BPmmHg			
3.7. Radial artery pulse	bpm;		
□ rhythmic □ arrhythmic	□ symmetrical □ asymr	netrical	tense not tense
3.8 Abdomen: □ soft □ rigid	□ deep palpation possible	□ non-tender	□ tender upon palpation
RQ Unconditioned reflexes (for infants under o	ne vezr).		
3.9. Unconditioned reflexes (for infants under o	•		□ Babkin reflex
	□ stepping reflex		<ul><li>Babkin reflex</li><li>Babinski reflex</li></ul>
□ rooting reflex	□ stepping reflex		
□ rooting reflex □ suck reflex	□ stepping reflex □ Bauer crawling reflex		□ Babinski reflex
□ rooting reflex □ suck reflex □ tonic neck reflex □ grasp reflex 3.10. Psychomotor development (for childr	□ stepping reflex □ Bauer crawling reflex □ plantar reflex		□ Babinski reflex □ Moro reflex
□ rooting reflex     □ suck reflex     □ tonic neck reflex     □ grasp reflex 3.10. Psychomotor development (for childref)	□ stepping reflex □ Bauer crawling reflex □ plantar reflex		□ Babinski reflex □ Moro reflex  ppropriate
□ rooting reflex □ suck reflex □ tonic neck reflex □ grasp reflex 3.10. Psychomotor development (for children children under one year: □ head up in prone position □ up on elbows in prone position	□ stepping reflex □ Bauer crawling reflex □ plantar reflex en): □ age-appropriate	□ age-inage walks holding onto a walks without support	□ Babinski reflex □ Moro reflex  ppropriate  one hand
□ rooting reflex □ suck reflex □ tonic neck reflex □ grasp reflex  3.10. Psychomotor development (for children children under one year: □ head up in prone position □ up on elbows in prone position □ rolls over supine to prone	□ stepping reflex □ Bauer crawling reflex □ plantar reflex en): □ age-appropriate	walks holding onto owalks without supposmiles socially	Babinski reflex  Moro reflex  ppropriate  one hand  ort
□ rooting reflex □ suck reflex □ tonic neck reflex □ grasp reflex  3.10. Psychomotor development (for childs For children under one year: □ head up in prone position □ up on elbows in prone position □ rolls over supine to prone □ rolls over prone to supine	stepping reflex  Bauer crawling reflex  plantar reflex  en): age-appropriate	□ age-inage walks holding onto a walks without supposmiles socially differentiates between	□ Babinski reflex □ Moro reflex  ppropriate  one hand
□ rooting reflex □ suck reflex □ tonic neck reflex □ grasp reflex 3.10. Psychomotor development (for childs For children under one year: □ head up in prone position □ up on elbows in prone position □ rolls over supine to prone □ rolls over prone to supine □ grasps toys	stepping reflex  Bauer crawling reflex  plantar reflex  en): age-appropriate	walks holding onto of walks without supposmiles socially differentiates between babbles	Babinski reflex  Moro reflex  ppropriate  one hand  ort  en parents' faces and faces of stranger
□ rooting reflex □ suck reflex □ tonic neck reflex □ grasp reflex  3.10. Psychomotor development (for childs for children under one year: □ head up in prone position □ up on elbows in prone position □ rolls over supine to prone □ rolls over prone to supine □ grasps toys □ sits supported	stepping reflex  Bauer crawling reflex  plantar reflex  en): age-appropriate	walks holding onto a walks without supposmiles socially differentiates between babbles fixes and follows an	Babinski reflex  Moro reflex  ppropriate  one hand  ort  en parents' faces and faces of stranger
□ rooting reflex □ suck reflex □ tonic neck reflex □ grasp reflex 3.10. Psychomotor development (for childer or childer one year: □ head up in prone position □ up on elbows in prone position □ rolls over supine to prone □ rolls over prone to supine □ grasps toys □ sits supported □ gets to sit	stepping reflex Bauer crawling reflex plantar reflex en): age-appropriate	walks holding onto of walks without supposmiles socially differentiates between babbles fixes and follows an coos	Babinski reflex  Moro reflex  ppropriate  one hand  ort  en parents' faces and faces of stranger
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□ rooting reflex □ suck reflex □ tonic neck reflex □ grasp reflex  3.10. Psychomotor development (for childs for children under one year: □ head up in prone position □ up on elbows in prone position □ rolls over supine to prone □ rolls over prone to supine □ grasps toys □ sits supported □ gets to sit □ creeps □ crawls	stepping reflex  Bauer crawling reflex  plantar reflex  en): age-appropriate	walks holding onto of walks without supposmiles socially differentiates between babbles fixes and follows an coos jargons pronounces basic de	Babinski reflex  Moro reflex  ppropriate  one hand ort  en parents' faces and faces of stranger  object  efining words
□ rooting reflex □ suck reflex □ tonic neck reflex □ grasp reflex  3.10. Psychomotor development (for childred in the children under one year: □ head up in prone position □ up on elbows in prone position □ rolls over supine to prone □ rolls over prone to supine □ grasps toys □ sits supported □ gets to sit □ creeps	stepping reflex  Bauer crawling reflex  plantar reflex  en): age-appropriate	walks holding onto of walks without supposmiles socially differentiates between babbles fixes and follows an coos jargons pronounces basic de	Babinski reflex  Moro reflex  ppropriate  one hand ort  en parents' faces and faces of stranger  object
□ rooting reflex □ suck reflex □ tonic neck reflex □ grasp reflex  3.10. Psychomotor development (for childs for children under one year: □ head up in prone position □ up on elbows in prone position □ rolls over supine to prone □ rolls over prone to supine □ grasps toys □ sits supported □ gets to sit □ creeps □ crawls	stepping reflex  Bauer crawling reflex  plantar reflex  en): age-appropriate	walks holding onto of walks without supposmiles socially differentiates between babbles fixes and follows an coos jargons pronounces basic de knows names of bas	Babinski reflex  Moro reflex  ppropriate  one hand  ort  en parents' faces and faces of stranger  object  fining words  ic objects and search for them when

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# 4. Osteopathic status4.1 General exam

4.1.1. Indicator evaluated:	symmetry / positioned at one level	asymmetrically / positioned at different levels
Anterior:		
head position		
interpupillary line		
auricle position		
mandible angle position		
shoulder height, shoulder girdle muscle knots		
clavicle level and symmetry		
thoracic rotation and shape		
thoracic excursion during tidal breathing		
waist triangles;		
upper extremity position		

navel position							
iliac crest position							
anterior superior iliac spine position							
pelvic rotation							
lower extremity position	(external or internal rotation	on, length)					
patella position							
foot arch position							
Posterior:							
head and cervical spin mastoid bone level	al cord position						
	der girdle muscle knots						
scapula level	del gildle muscle knots						
spinal cord in coronal p	lane						
waist triangles	idile						
iliac crest height							
posterior superior iliac	spine position						
gluteal fold symmetry	-rr						
pelvic rotation							
leaning on the foot							
heel position					Ú		
4.1.2. Barré's vertical evalua	tion: deviati	ion		□ no deviat	ion	•	
4.1.3. Spinal curves in sagittal p	lane:						
cervical lordosis thoracic kyphosis lumbar lordosis 4.2 Muscle tone: Additional information:	□ preser □ preser □ preser □ symm	rved 🗆 red	luced luced luced	□ increased □ increased □ increased □ asymmet	d d		
4.3. Active tests:							
general flexion general extension right lateral flexion left lateral flexion	□ not restricted □ not restricted □ not restricted □ not restricted	restricted: restricted: restricted: restricted:	☐ in cerv☐	rical in	thoracic thoracic thoracic thoracic	□ in lun □ in lun	nbar region nbar region nbar region nbar region
Additional information:							
4.4. Global flexion test (for chi	ldren under one year):			□ restricted	□ not re	stricted	
	· · · · · · · · · · · · · · · · · · ·	the back	□ to the	e right $\Box$	to the left		
Additional information:							
4.6. Flexion test: standing: □ negative	e positive	E 2/10	П // l l		□ on the	a right	□ on the left
standing. □ negative	positive	□ «+» □ <b>«+»</b>	□ «++» □ <b>«++»</b>	□ «+++» □ <b>«+++»</b>	□ on the	-	□ on the left
4.7. Supine leg length evaluation	-	□ ""	⊔ <i>\\</i> ⊤т <i>n</i>	⊔ <i>\\</i> ⊤⊤ <i>™</i>		LIIGIII	i on the left
T. 7. Suprife leg length evaluation	/II.						
	equal shortened on the right shortened on the left						

4.8. Joint and surrounding soft tissues rigidity:
4.8.1. Lower extremity and pelvic joints:

Joint evaluated: no rigidity and restriction rigidity and restriction sacroiliac

	hip			Ð
	knee			Ç.
	ancle			
	subtalar			
	cuboideonavicula	r	Q	
	intercuneiform			
	metatarsophalang	eal		
4.8.2.	Shoulder girdle and upper	er extremity joints:	•	
	Joint evaluated:		rigidity and restriction	no rigidity and restriction
	sternoclavicular			!
	acromioclavicular			
	shoulder			
	elbow			
	wrist			
4.9. Tran	slation evaluation:			
	pelvis	□ not restricted	□ restricted on the right	□ restricted on the left
	lumbar region	□ not restricted	□ restricted on the right	□ restricted on the left

cervic	cic region al region xion and extension eva	□ not restricted □ not restricted aluation:	□ restricted or □ restricted or	_	□ restricted on the left □ restricted on the left
thorac	nr region cic region of visceral mass shift i	□ no restriction □ no restriction n sagittal plane:	□ flexion res		□ extension restricted □ extension restricted
upper a	and lower abdominal cabdominal cavity ic cavity of visceral mass shift is	·	□ not restric □ not restric □ not restric	cted  uentrally restrict	ted
upper a thorac viscera	and lower abdominal cabdominal cavity ic cavity al space of the neck ere Test (evaluation for		□ not restric □ not restric □ not restric □ not restric □ se year)	eted restricted on the	right □ restricted on the left right □ restricted on the left
thoraci abdom 4.14. Thoracic ar	nd cervical region vol ic volume: inal and pelvic volume: nd abdominal cavity mo no restriction enic aspect evaluation	obility evaluation: □ thoraci	□ no restriction □ no restriction □ no restriction c cavity restriction	uentrally restricted uentrally restricted uentrally restricted abdom	<ul> <li>□ dorsally restricted</li> <li>□ dorsally restricted</li> <li>□ dorsally restricted</li> </ul>
<ul><li>4.15.2. Cardiac r</li><li>4.15.3. Thoracic</li><li>4.15.4. Radial ar</li><li>4.15.5. Posterior</li></ul>	ythmic impulse: hythmic impulse: rhythmic impulse: tery pulse: symmetric tibial artery pulse: osteopathic tests:	cal	_per minute; rangeper minute; range  _ yes	; intensity; intensity; intensity; intensity; thensityythmicyesno; rhythmic	

5. Osteopathic conclusion.

Level	/ Dysfunctio	Biomechanical, Points	R	Chythmogenic, Points		Neurodynamic*,		
	n Global	123	Cranial 1 2 3 Cardiac 1 2 3 Respiratory 1 2 3			Psychoviscerosomatic 1 2 3 Postural 1 2 3		
	Regional	Region:	Structural part	Visceral part	Cr	Viscerosomatic component	Somato- visceral component	
		Head	1 2 3		C1—C3	1	23	
		Neck	1 2 3	123		1 2 3	1 2 3	
		Upper extremities	1 2 3		C4—C6	1 2 3	123	
		Thoracic	1 2 3	123	C7—Th1	1 2 3	123	
		Lumbar	123	123	Th2—Th5	1 2 3	123	
		Pelvic	1 2 3	123	Th6—Th9	1 2 3	1 2 3	
		Lower extremities	1 2 3		Th10—Ll	1 2 3	1 2 3	
		Dura	I 23		L2—L5	1 2 3	1 2 3	
	Local	Individual somatic dysfunction dysfunction:	ons are indicated (acute	or chronic):	•			

*Global neurodynamic dysfunction is not evaluated in children under one year. Postural dysfunction is evaluated in children from 12 y 6. <b>Diagnosis:</b> Primary condition:		
o. Dugitosis. Himary condition.	ICD-10 code	
Complications:		
Co-morbidities:	ICD-10 code	
	ICD-10 code	
7. Treatment plan:		
8. Sick leave, certificate:		
9. Recommendations:		
9.1. Specialist advice:		
□ neurologist □ GP □ pediatrician □ orthopedist □ ophthalmo	logist □ dentist	
9.2. Tests:		
□ complete blood count □ urinalysis test □ biochemical profile		
□ X-ray □ ultrasonography:		
□ MRI: □ CT:		
Additional diagnostic techniques:		
9.3. Drug treatment:		
9.4. Additional drug-free treatment modalities: □ rehabilitation exercises □ massage	□ physiotherapy	□ reflexotherapy
9.5. Motion regime recommendations:		
9.6. Dietary recommendations:		
9.6. Dietary recommendations:  9.7. Re-examination in	Osteopath:	()