

UPPER BODY

HOGGAN Scientific, LLC

Muscle Testing Reference Sheet



Patient Name _____

Date _____

LEFT

TEST 1	TEST 2	TEST 3

FOREARM

SUPINATOR GROUP
PRONATOR GROUP

RIGHT

TEST 1	TEST 2	TEST 3

WRIST

FLEX. CARPI RAD.
PRONATOR GROUP
EXT. CARPI RAD. & BR.
EXT. CARPI ULN.

FINGERS

LUMBRICALS
FLEX. DIGIT. SUP.
FLEX. DIGIT. PROF.
EXT. DIGIT. COM.
PALMAR INTEROSSEI
DORSAL INTEROSSEI

THUMB

FLEX. POLL. BR.
FLEX. POLL. LG.
EXT. POLL. BR.
EXT. POLL. LG.
ABD. POLL. BR.
ABD. POLL. LG.

UPPER BODY

LEFT

TEST 1 TEST 2 TEST 3

STERNOCLEIDOMASTOID

EXTENSION GROUP

SCAPULA

SERRATUS ANTERIOR

TRAPEZIUS (SUP)

TRAPEZIUS (INF)

TRAPEZIUS (MIDDLE)

RHOMBOIDS

SHOULDER

DELTOID (ANT)

LATASSIMUS DORSI

TERES MAJOR

DELTOID (MIDDLE)

DELTOID (POST.)

PECTORALIS MAJOR

LATERAL ROTATOR GROUP

MEDIAL ROTATOR GROUP

ELBOW

BICEPS BRACHII

BRACHIALIS

BRACHIORADIALIS

TRICEPS BRACHII

RIGHT

TEST 1 TEST 2 TEST 3

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LEFT

TEST 1	TEST 2	TEST3

HIP

ILIOPSOAS
SARTORIUS
GLUTEUS MAXIMUS
GLUTEUS MEDIUS
TENSOR FASCIA LATA.
ADDUCTOR GROUP
LATERAL ROTATOR GROUP
MEDIAL ROTATOR GROUP

RIGHT

TEST 1	TEST 2	TEST3

KNEE

BICEPS FEMORIS
HAMSTRINGS
QUADRICEPS FEMORIS

ANKLE

GASTROCNEMIUS
SOLEUS

FOOT

TIBIALIS ANTERIOR
TIBIALIS POSTERIOR
PERONEUS BREVIS
PERONEUS LONGUS

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LEFT

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TOES

- LUMBRICALS
- FLEX. DIGIT. BR.
- FLEX. DIGIT. LG.
- EXT. DIGIT LG.
- EXT. DIGIT BR.

RIGHT

TEST 1	TEST 2	TEST 3

HALLUX

- FLEX. HALL. BR.
- FLEX. HALL. LG.
- EXT. HALL. BR.
- EXT. HALL. LG.

