

POST-NATAL RETURN TO EXERCISE ASSESSMENT

PART ONE: For High Impact, High Velocity Activities

eg Running, Jumping, Kickboxing, Skipping, etc

1.1 PRIMARY ASSESSMENT - Levator Hiatus AP Diameter (by GH +PB)

At Rest

5	5.5	6	6.5	7	7.5	8.0	8.5	9
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On Valsalva

<7	7	7.5	8	8.5	9	9.5	10	10.5
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1.2 SECONDARY ASSESSMENT

- Levator Hiatus Transverse Diameter

<2	2	2.5	3.0	3.5	4.0	> 4
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- Avulsion Risk Factors

- Previous Vaginal Birth

NO	YES
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- Forceps Birth

NO		Yes
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- Age at First Vaginal Birth

<25	25-35	>35
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- Width Between Levator Insertion > 3.5cm

< 3.5	3.5-4.0	> 4.0
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- GH + PB

< 8	8-9	> 9
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- Pelvic Floor Contraction (MOS) Right

>= 3	1 or 2	0
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- Pelvic Floor Contraction (MOS) Left

>= 3	1 or 2	0
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Clinician's Opinion of Presence of Avulsion:

Right Side: YES / NO

Left Side: YES / NO

OVERALL ASSESSMENT FOR HIGH IMPACT EXERCISE – running, jumping, etc

Resting Support Risk:

LOW	MOD	HIGH
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Comment: _____

CLINICIAN: _____ Signed: _____ Date: _____

PART TWO: PELVIC FLOOR STRENGTH ASSESSMENT – For upright stationary weights etc

Part Two of the Assessment is only required for women who are assessed as mod – high risk on Assessment Part 1. Results of this section are only applicable to exercises where it is feasible to contract the pelvic floor for support eg upright hand weights, semi-squats, some lunges etc

RISK MATRIX

PERITRON Performed: Yes / No

Resting Pressure: _____ cmH₂O + Squeeze Pressure: _____ cmH₂O = TOTAL _____

									5
									4
									3
									2
									0-1
<7	7	7.5	8	8.5	9	9.5	10	10.5	MOS
Levator Hiatus Size (GH + PB)									

Duration which the above Active Support Can be maintained with Good technique (including breathing)

sec	>20	10-20	9-10	7-8	5-6	3-4	1-2	0
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Impact of Head Lift / Crunch / Semi-Situp

Perineal Descent

No Descent

Current Pelvic Floor Disorders – likelihood that symptoms may limit the woman’s comfort in performing exercises

- | | | | |
|-------------------------------------|------|----------|--------|
| - Anterior Wall (bladder) Prolapse | MILD | MODERATE | SEVERE |
| - Uterine / Central Prolapse | MILD | MODERATE | SEVERE |
| - Posterior Wall (rectum) Prolapse | MILD | MODERATE | SEVERE |
| - Stress Urinary Incontinence | MILD | MODERATE | SEVERE |

OVERALL ASSESSMENT FOR STATIONARY / LOW IMPACT Exercise

RISK FOR STATIONARY EXERCISE / SQUATS etc:

LOW	MOD	HIGH
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Comment: _____

CLINICIAN: _____ Signed: _____ Date: _____