

## LANDING ERROR SCORING SYSTEM (LESS)

### SAGGITAL VIEW:

Check if an error:

- |  | 1                        | 2                        | 3                        |
|--|--------------------------|--------------------------|--------------------------|
| 1. Knee Flexion Angle at Initial Contact: <b>&gt; 30 deg.</b><br>Error if <b>NO</b>                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Hip Flexion Angle at Initial Contact: <b>Hips are Flexed</b><br>Error if <b>NO</b>              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Trunk Flexion Angle at Initial Contact: <b>Trunk is Flexed</b><br>Error if <b>NO</b>            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Knee Flexion Displacement: <b>&gt; 45 deg. more than Initial Contact</b><br>Error if <b>NO</b>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Hip Flexion Displacement: <b>Hips flex more than Initial Contact</b><br>Error if <b>NO</b>      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Trunk Flexion Displacement: <b>Trunk flexes more than Initial Contact</b><br>Error if <b>NO</b> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Ankle Plantar-Flexion Angle at Initial Contact: <b>Toe to heel</b><br>Error if <b>NO</b>        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

### FRONTAL VIEW:

- |  |                          |                          |                          |
|--|--------------------------|--------------------------|--------------------------|
| 8. Initial Foot Contact: <b>Symmetrical</b><br>Error if <b>NO</b>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Lateral Trunk Flexion at Initial Contact: <b>Trunk is Vertical</b><br>Error if <b>NO</b>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Knee Valgus Angle at Initial Contact: <b>Knees over mid foot</b><br>Error if <b>NO</b>   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Stance Width: <b>&lt; Shoulder width</b><br>Error if <b>YES</b>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Stance Width: <b>&gt; Shoulder width</b><br>Error if <b>YES</b>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Max IR Foot Position: <b>Toes &gt; 30 deg. IR at max flexion</b><br>Error if <b>YES</b>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Max ER Foot Position: <b>Toes &gt; 30 deg. ER at max flexion</b><br>Error if <b>YES</b>  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Knee Valgus Displacement: <b>Medial knee movement at max flexion</b><br>Error if <b>YES</b> (Tibial tubercle inside 1 <sup>st</sup> ray) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

### OVERALL:

- |   |                          |                          |                          |
|---|--------------------------|--------------------------|--------------------------|
| 16. Joint Displacement (Sagittal Plane)<br>SOFT = no error, AVERAGE = 1 error, STIFF = 2 errors | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 17. Overall Impression<br>EXCELLENT = no error, AVERAGE = 1 error, POOR = 2 errors              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**TOTALS:** \_\_\_\_\_ **AVG:** \_\_\_\_\_