Kinetisense Best Practices

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Clinical Settings

There are numerous ways to use Kinetisense. While there is no right or wrong way, it is important to find the set up that works best for you. Below are a few examples from practitioners that have used Kinetisense in their practice.

General Set Up
- Tripod & Camera OR iPad
- Room (6-8 foot distance from camera to person)
- Try to be 1-2 feet away from the wall for best results

iPad Requirements

- Room (6-8 foot distance from camera to person)
- Try to be 1-2 feet away from the wall for best results
- Camera should be approximately 3-3.5 feet above the ground
- Suggested stands:

  - **Magic keyboard**
  - **Tripod mount adapter**
  - **Rolling Gooseneck**
  - **Table top stand**

Gym

- Tripod & Intel Camera or iPad
- TV
- HDMI adapter or WiFi for screen sharing with Smart TV
- Mats are helpful because they allow the camera to differentiate between the floor, wall, and the individual
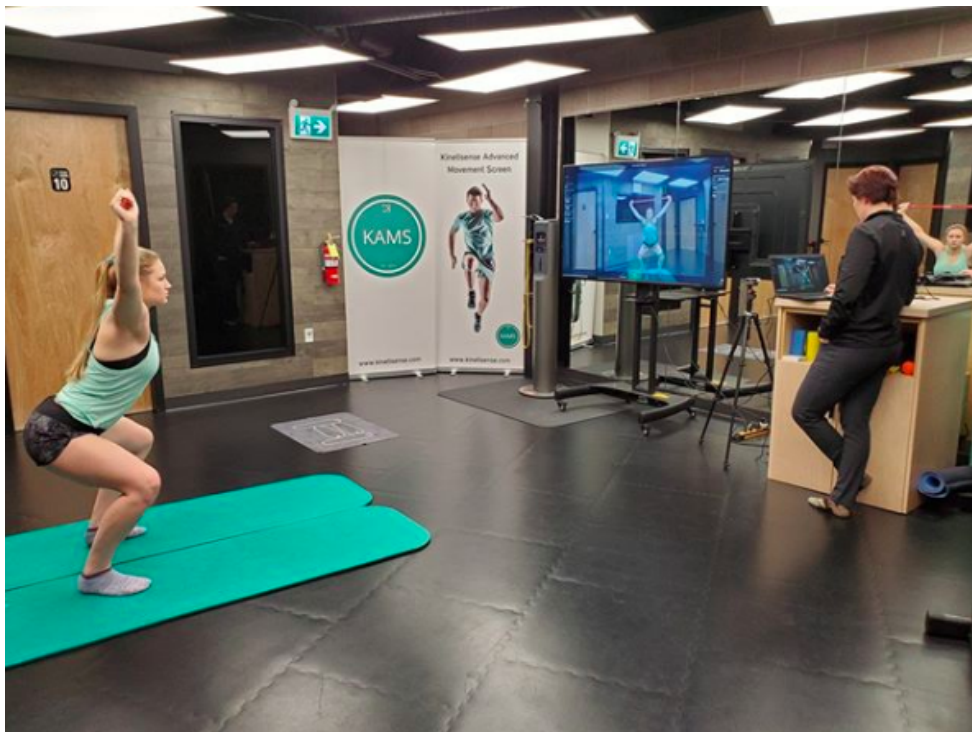
Clinical Portability

- Computer or iPad
- Suction cup mount and Intel Camera (not needed for iPad version)
- Cart
- The cart can be rolled around from room to room (bring Kinetisense to your clients)

Suction cup mounts onto back of computer

Clinical Uses
Assess - Correct - Reassess

Community Screening/ROI
- Sports teams: High school, clubs
- Populations: Senior living facilities
- Corporations: Workplace wellness

Modules and Their Applications

KAMS
- Identify mobility or stability issue, rehab plan to correct, reassess
- Identify KAMS lowest score, rehab plan to correct, reassess
- KAMS indexes (balance, flexibility, power extremity), rehab plan to correct, reassess
- Identify classification of functional mobility

Workflows
- Personalized Clinical Screening
- Concussion baseline testing (athletes/teams)
- Regional ROM workflows

Balance
- SI joint pain. Research has shown that people with low back pain have poor balance. Assess balance on symptomatic side pre and post treatment. As pain decreases with treatment, train muscles to re-fire appropriately and screen again.
- Pre/post surgery (knee, shoulder, hip)
- Pre/post injury athletes

- - Regain proprioception at injured area and keep client engaged as they watch their improvements
- Gait assessment
  - Single leg stance
- Concussion screening
  - Athletes
    - Test local teams to gather each athlete's baseline balance data before a concussion occurs. Compare baseline data to current data and know when they can return to play
  - Geriatric screening
    - Medications
      - Assess pre-medication, post-medication - see how different medications affect balance
    - Risk of fall
      - Identify areas of concern/poor proprioception
      - Track progressions and regressions throughout treatment

Posture
- Identify regions of dysfunction and correct
- Pre and post treatment
  - CMT
  - Postural corrective exercises/stretches
  - Strength training
  - Soft tissue

ROM
- Pre and post treatment
  - MFR
  - CMT

      ○ Corrective exercises/stretches

<u>Vertical Jump</u>
- Lower extremity power/strength, compare asymmetries
- Lower extremity endurance
- Lower extremity stability/mobility

<u>Single Leg Hop</u>
- ACL injury susceptibility
- Lower extremity stability, mobility, and endurance

<u>CPT Billing codes</u>
- Medico-legal cases