Interventions focused on symptoms first before progressing to
mobility, then stability exercises.

**Discussion**

- The SFMA helped identify subtle impairments remote to the
  site of pain which may have been missed with a uniplanar.
- RI, identified by the SFMA, surfaced in this patient as
  impairments at the shoulder, thoracic spine and hip and
  were determined to be contributors to the patient's LBP.
- A joint-by-joint pattern emerged and guided intervention as
  therapists believe that limited ROM at the hip, thoracic
  spine and shoulder were leading to compensation at the
  lumbar spine which is designed for stability and doesn't
  tolerate excessive movement.

Resolution of mobility and stability impairments with a focus on
motor control resulted in improved functional movement patterns.

According to Cook, these basic functional movements are
the foundation for higher skills and athletics such as weight
lifting and soccer in this patient's case.

Without a foundation for proper movement, even young
active athletes are susceptible to injury.

**Conclusion**

The SFMA is a useful tool to qualitatively analyze movement and
identify dysfunction at, and remote to, the site of pain in
order to effectively develop a plan of care and guide treatment
in a youth athlete with LBP. It would be beneficial to continue
to explore its application, validity and associated outcomes in
various musculoskeletal injuries.

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**References**


More information about the Functional Movement System can be found at www.mydynamicbody.com