

**Clinical Movement Analysis Society - UK and Ireland
Statement of Purpose Form**



Name of Laboratory	Anderson Gait Analysis Laboratory
Address	SMART Centre Astley Ainslie Hospital 133 Grange Loan Edinburgh EH9 2HL
Telephone number	01315379435
Email	alison.m.richardson@nhslothian.scot.nhs.uk
Website	www.smart.scot.nhs.uk

Please provide a brief description of your laboratory – history, location, etc. Also describe main activities – clinical/teaching/research (maximum 150 words).

Gait lab set up in 1986 with the purchase of our first Vicon system.

The lab was initially run by the bioengineering centre and staffed by clinical researchers before being launched as a clinical service funded by NHS Lothian in 1996.

Situated in the SMART Centre, Astley Ainslie Hospital, Edinburgh.

Main Clinical Activities: Pre and post intervention Motion Analysis for Neuro-Paediatrics, Adult Neurology, Prosthetics and Orthopaedics.

Main Research Activities: Paediatric Neurology, Prosthetics, Activity Monitoring, Adult Neurology

Main Teaching Activities: National Centre Short Course; Applied Biomechanics MSc, (both) University of Strathclyde; In-service training for Paediatric Physiotherapy Depts/ Medical staff, Prosthetists/Orthotists as requested.

Host Institution

NHS Trust	<input checked="" type="checkbox"/>
University/Academic	<input type="checkbox"/>
Private Company	<input type="checkbox"/>

Staffing

	Employed by laboratory	Available for consultation
Orthopaedic Surgeon	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Rehabilitation Consultant	<input type="checkbox"/>	<input type="checkbox"/>
Paediatrician	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Neurologist	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Physiotherapist	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Sports Scientist	<input type="checkbox"/>	<input type="checkbox"/>
Bioengineer (Clin Sci)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Orthotist	<input type="checkbox"/>	<input type="checkbox"/>
Prosthetist	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Podiatrist	<input type="checkbox"/>	<input type="checkbox"/>
Others (please specify: Technician	<input checked="" type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>

Named Staff

	Name	Email	Phone
Main contact	Alison Richardson	Alison.m.richardson@nhslothian.scot.nhs.uk	01315379435
Clinical Lead	Alison Richardson	Alison.m.richardson@nhslothian.scot.nhs.uk	01315379435
Technical Lead	To be appointed		

Clinical Expertise

- please indicate if you have a major interest in this area, a minor interest or would not accept a referral (excluded)

	Adults	Children
Cerebral Palsy	Major	Major
Neuromuscular disorders	Minor	Major
Orthopaedics	Minor	Minor
Spinal injuries	Minor	Minor
Stroke	Minor	Minor
Orthotics	Minor	Major
Orthotic tuning	Minor	Major
Prosthetics	Major	Minor
Sports	Excluded	Excluded

Others (please specify:)		
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Testing Available

Orthogonal video filming	<input checked="" type="checkbox"/>
Video vector technology	<input type="checkbox"/>
3D movement analysis	<input checked="" type="checkbox"/>
Force plate	<input checked="" type="checkbox"/>
Electromyography	<input checked="" type="checkbox"/>
Plantar pressure measurement - barefoot	<input type="checkbox"/>
Plantar pressure measurement – in shoe	<input type="checkbox"/>
Energy cost measurement (oxygen/HR)	<input type="checkbox"/>
Balance assessment	<input type="checkbox"/>
Upper limb assessment	<input type="checkbox"/>
Other (please specify)	<input type="checkbox"/> <input type="checkbox"/>

Levels of Reporting (tick all that are available)

Graphs/Data only	<input checked="" type="checkbox"/>
Written description of movement and deviations	<input checked="" type="checkbox"/>
Treatment recommendations	<input checked="" type="checkbox"/>