

ACL Hop & Stop

Name _____ Date _____ Height _____ Weight _____

Club _____ Age _____ Gender: M F Position _____ Knee Injury _____

	Hop		Leap	
	Left	Right	Onto Left	Onto Right
Trial 1				
Trial 2				
Trial 3				
Mean				
Symmetry			S/H →	
% Height			Symm	

Test	Hop % Height		S/H Ratio	
	Left	Right	Left	Right
Score				
Sum				
Symmetry Score				
Total Score				