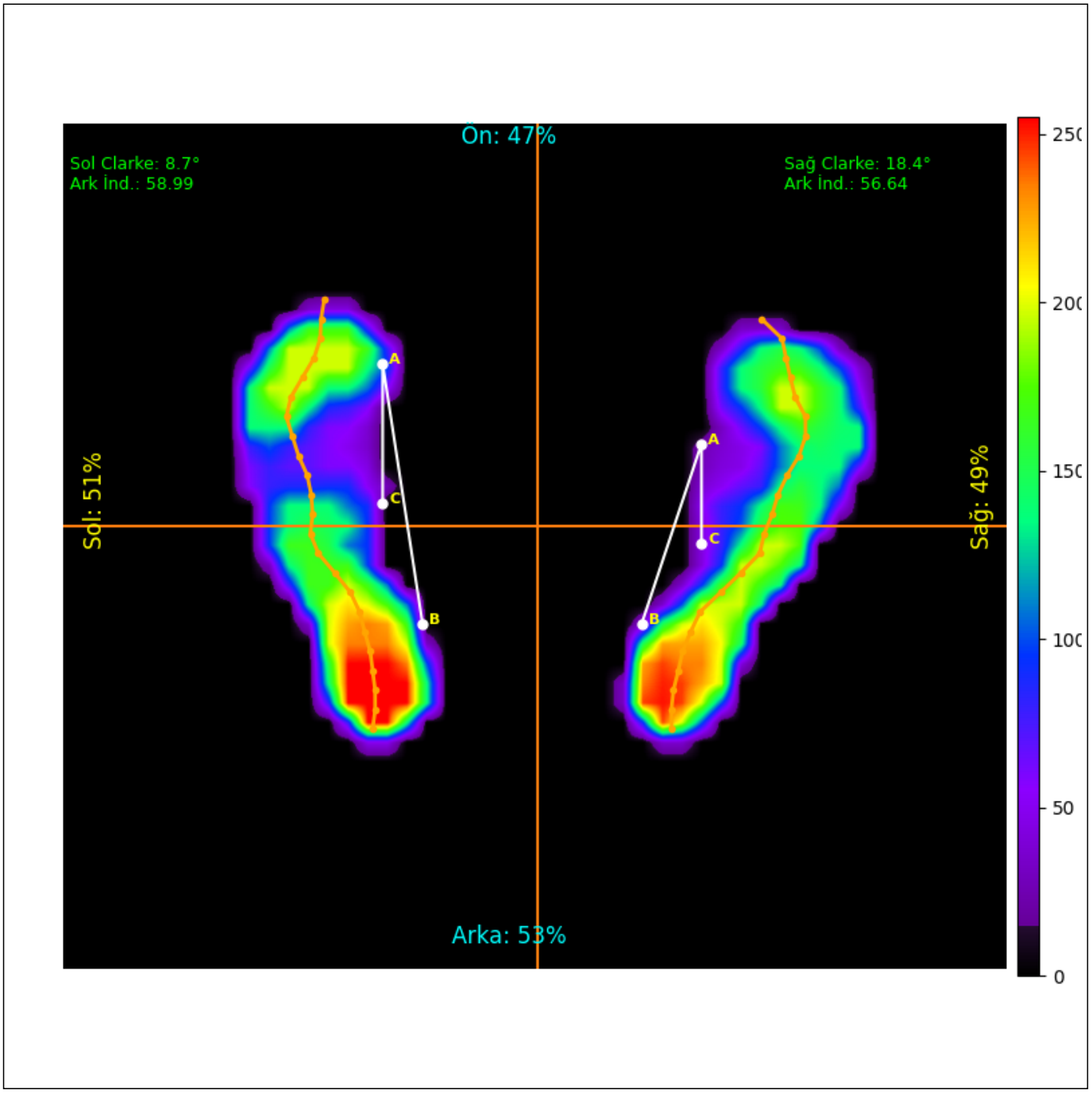
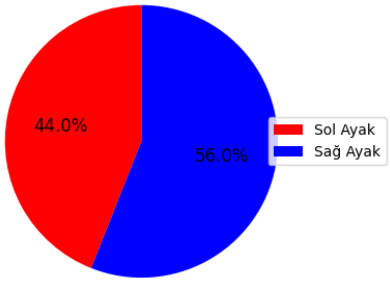
Değerler göreceli karşılaştırma içindir.

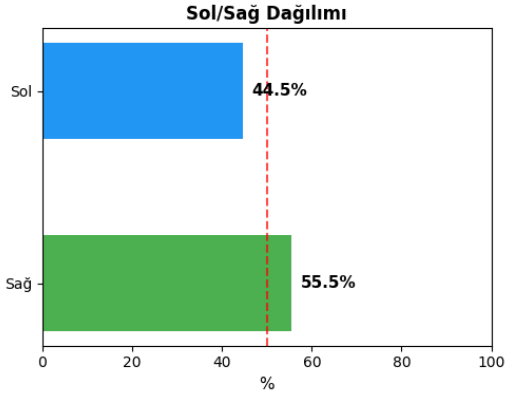


Göreceli Sol/Sağ Yük Dağılımı (%)

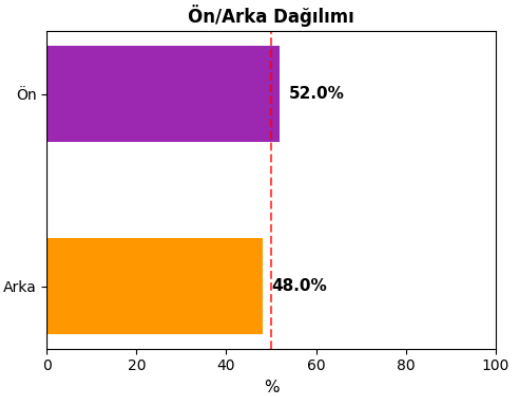


* Göreceli karşılaştırma değeri

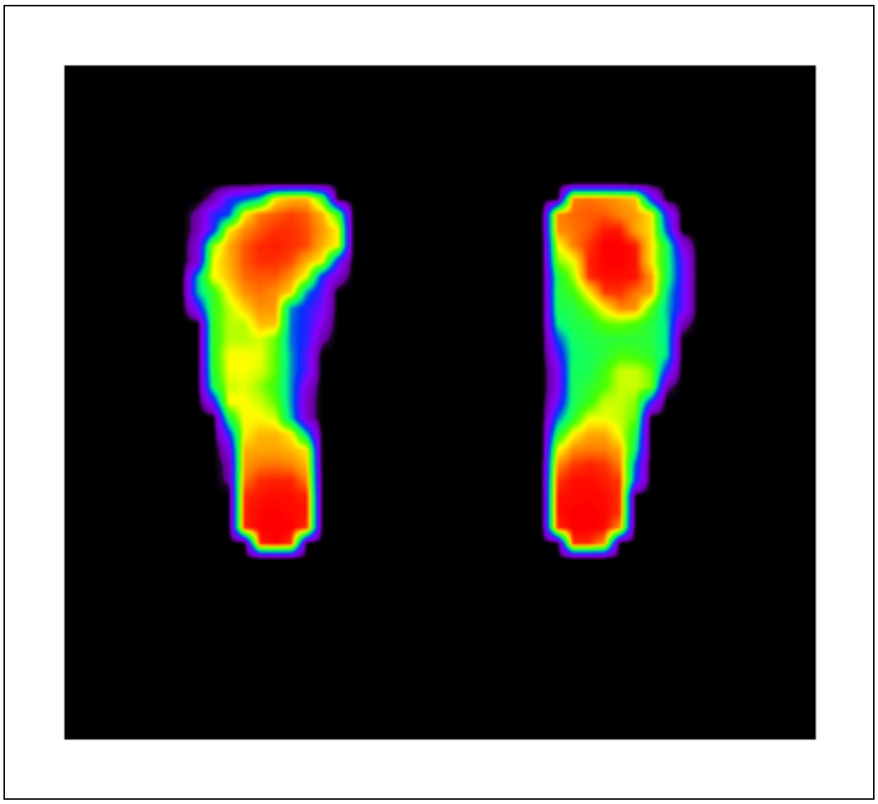
Sol/Sağ Dağılımı

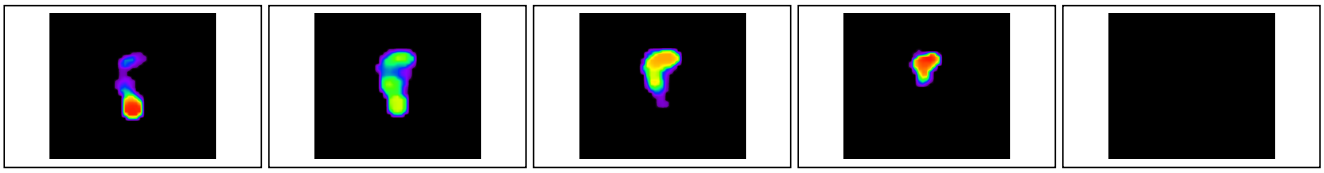


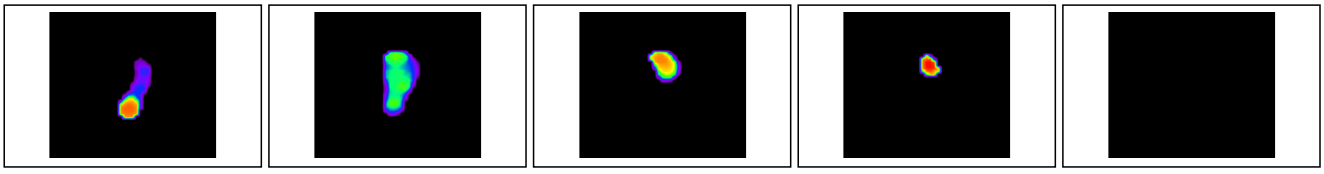
Ön/Arka Dağılımı

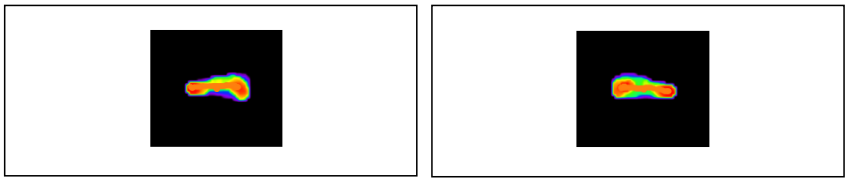


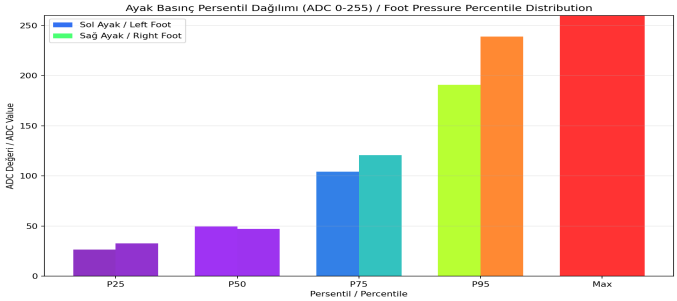
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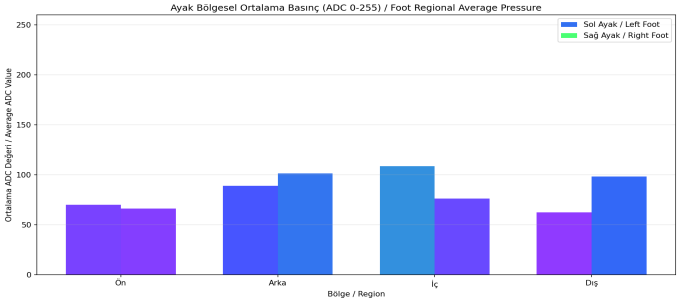


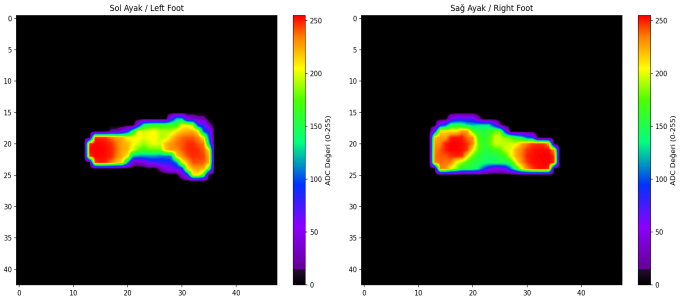












Hasta Bilgileri

Ad: Ahmet Faruk
Soyad: Oflazlar
Yaş: 38
Cinsiyet: Erkek
Boy: 185 cm
Ağırlık: 84 kg
Ayakkabı Nu.: 44
Telefon: 05324538827

Firma Bilgileri

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info@cibody.com

Yürüme Analizi Raporu

Hasta: Ahmet Faruk Oflazlar

Ağırlık: 84 kg

Yaş: 38

Boy: 185 cm

Ayakkabı Nu.: 44

Analiz Özeti

Toplam Adım: 12

Sol Ayak Adımları: 6

Sağ Ayak Adımları: 6

Eşleşen Çift Sayısı: 6

Ort. Duruş Süresi: Sol 1091ms | Sağ 1231ms

Örnekleme Hızı: 36.0 Hz (max: 39.8) - KABUL EDİLEBİLİR | 520 frame

Çift Bazlı Simetri Metrikleri:

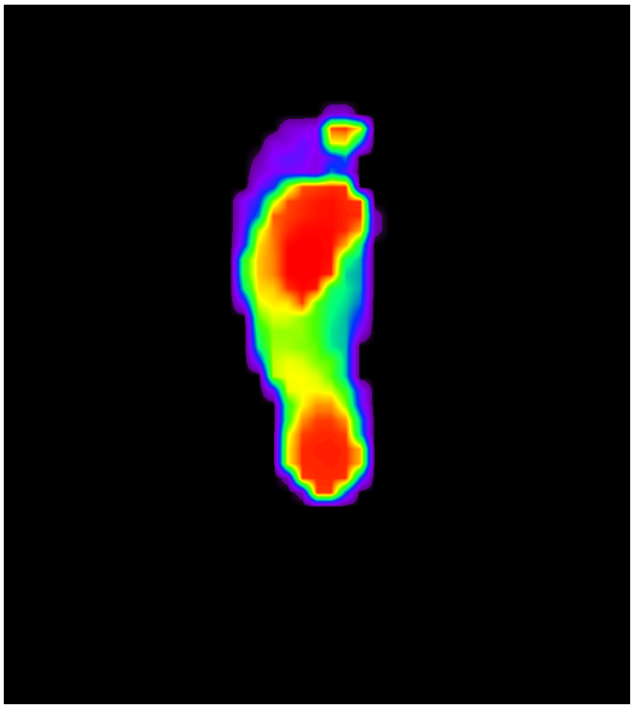
Yük Dağılımı: Sol %49.9, Sağ %50.1

Ortalama Çift Asimetrisi (RSI): %14.3 (Hafif Asimetri)

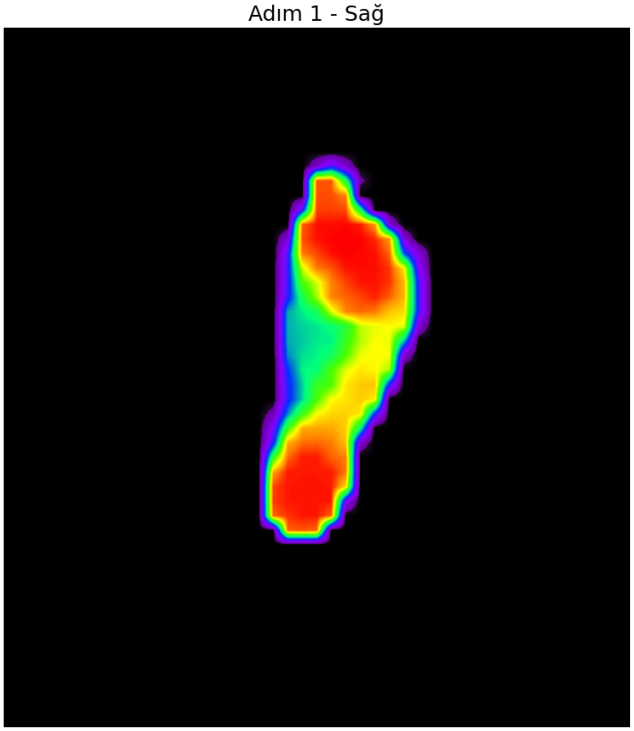
* * Çift bazlı karşılaştırma - sadece eşleşen adımlar dahil

Adım Görüntüleri

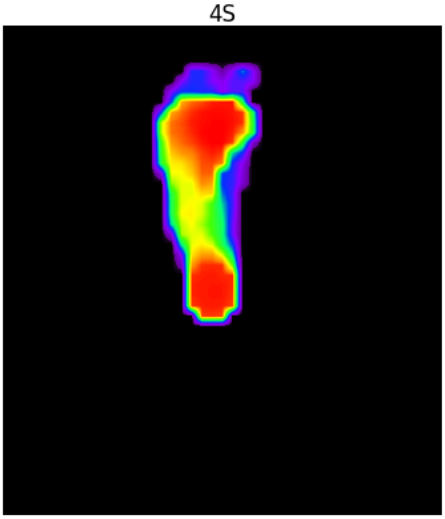
Adım 2 - Sol



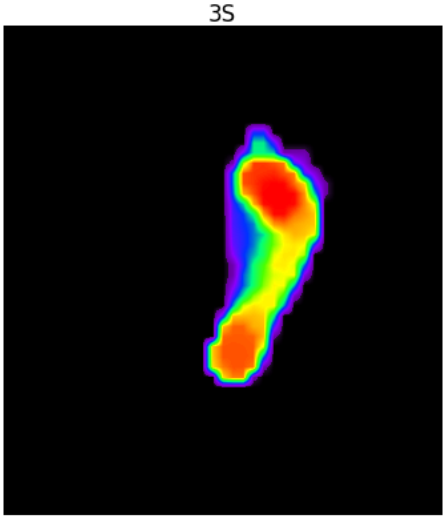
Adım 1 - Sağ



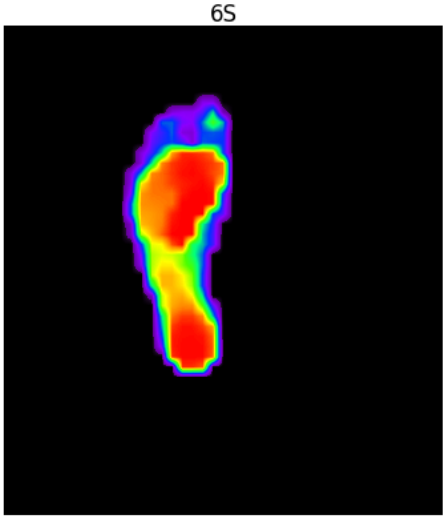
4S



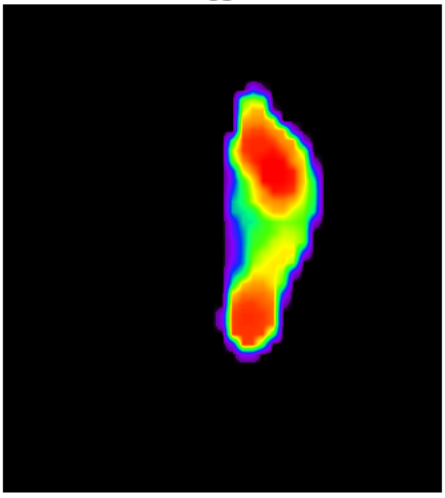
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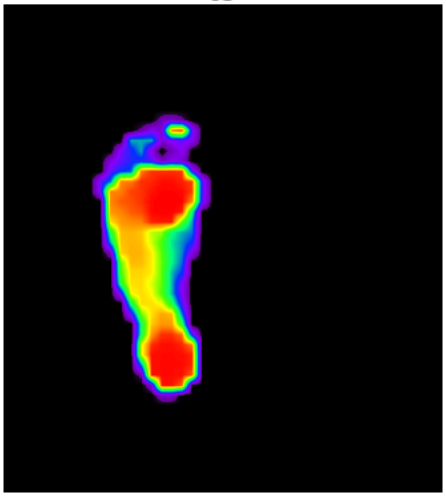
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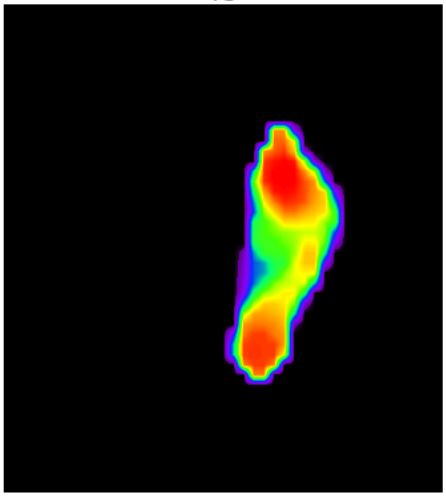
5S



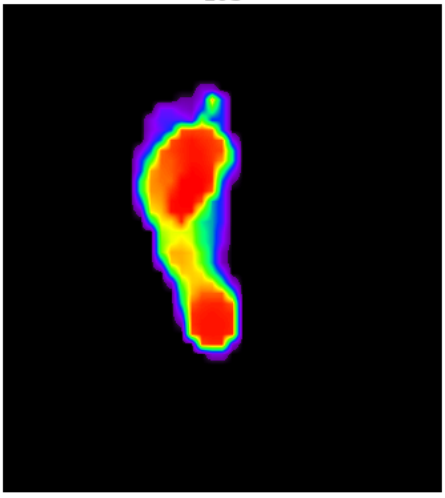
8S



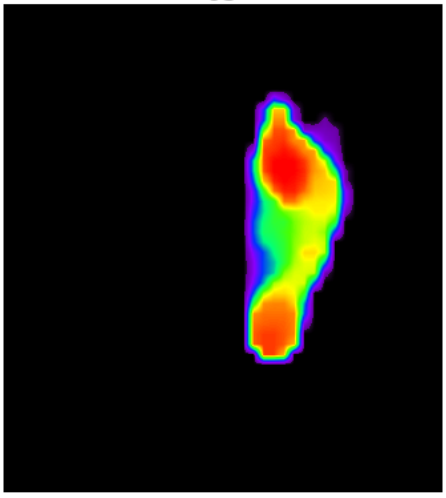
7S



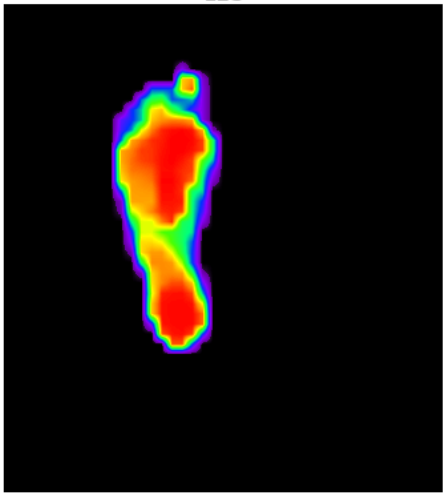
10S



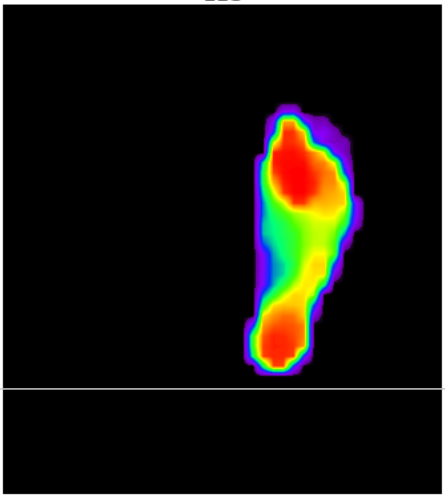
9S



12S

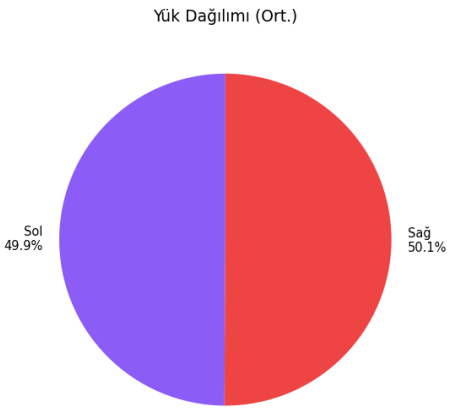


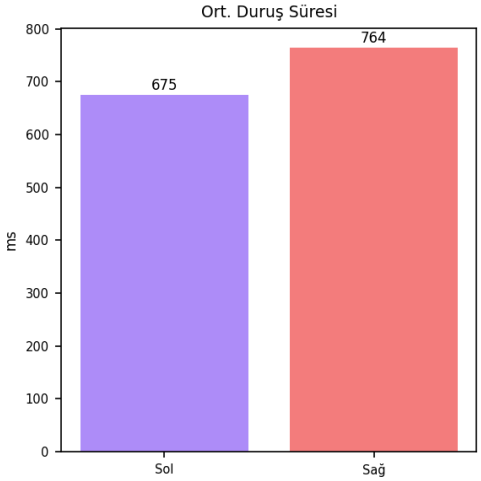
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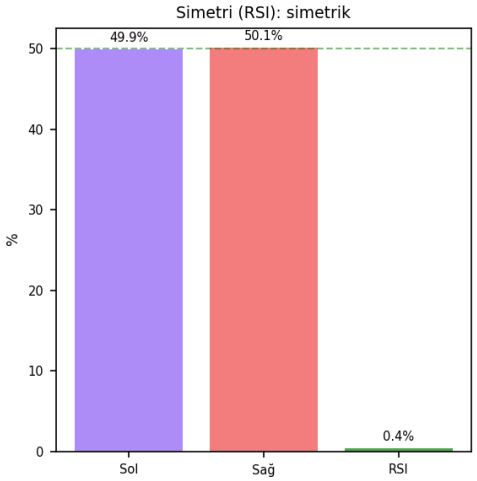


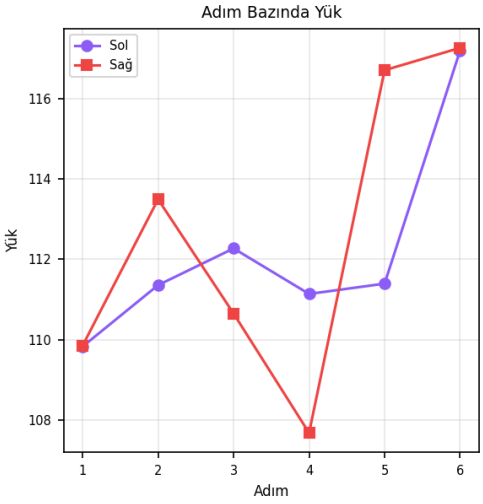
Dijimo Medikal Bilişim Teknoloji Ltd. Şti.
+05324538827 | info@cibody.com
Konya\Turkey

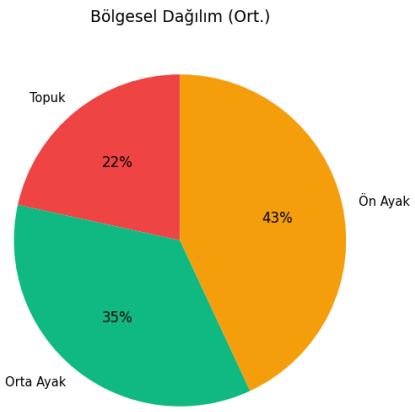
Yürüme Analizi Özeti

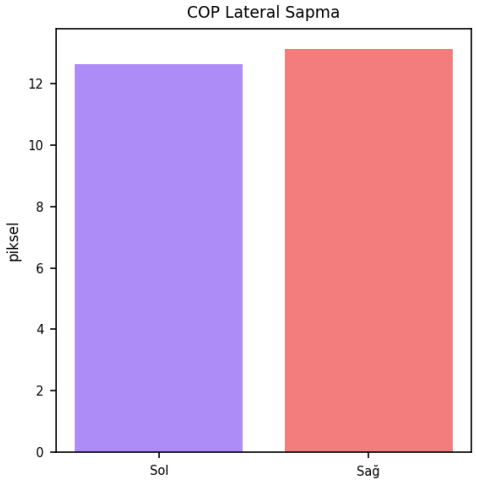






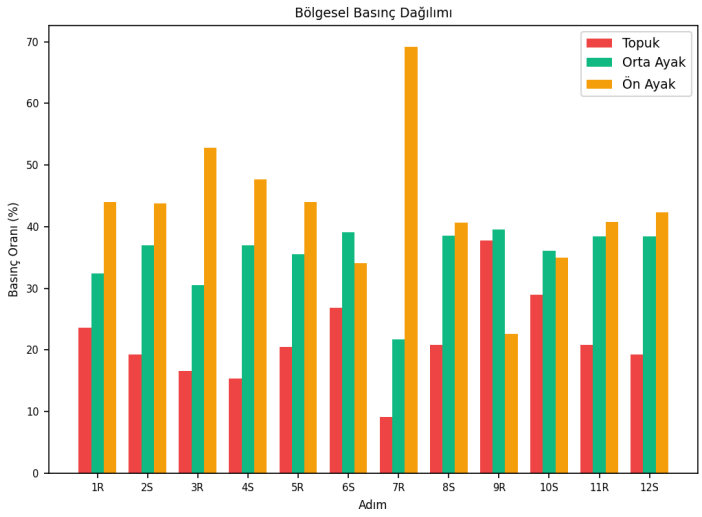


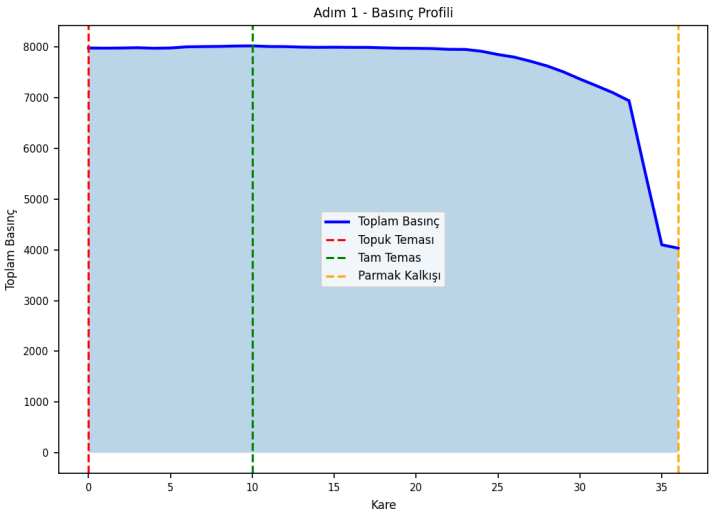


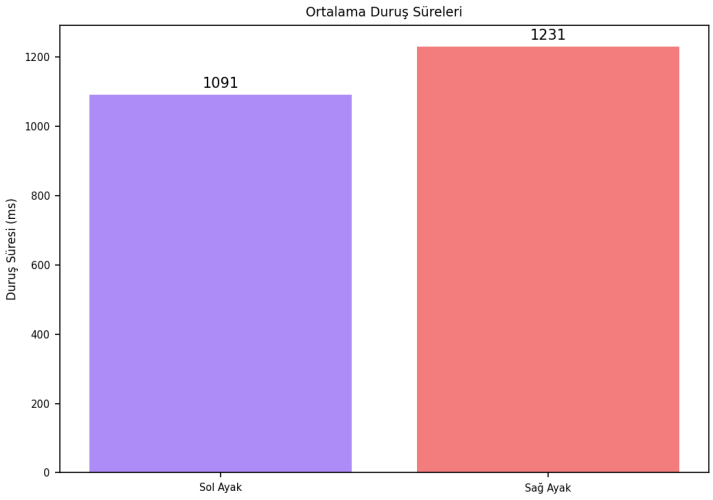


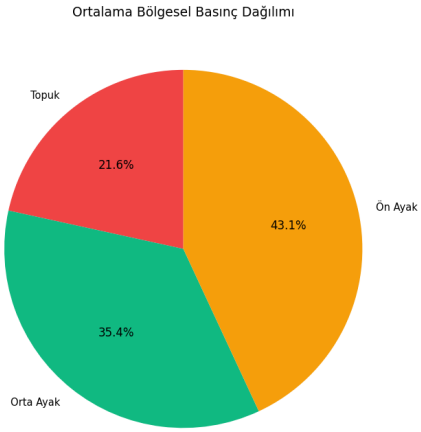
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Yürüme Fazları Analizi



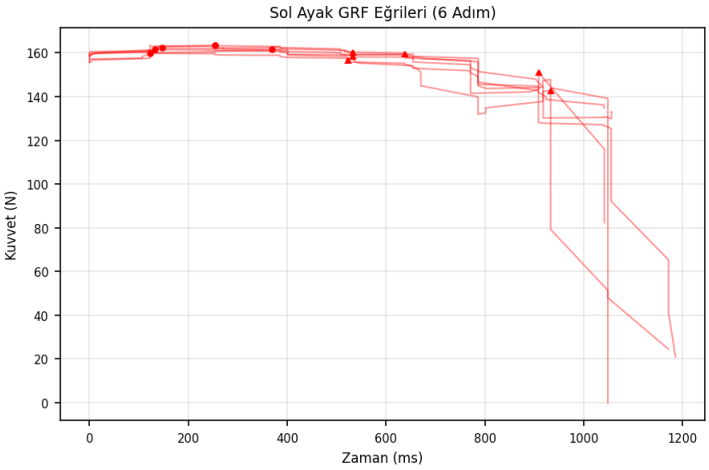


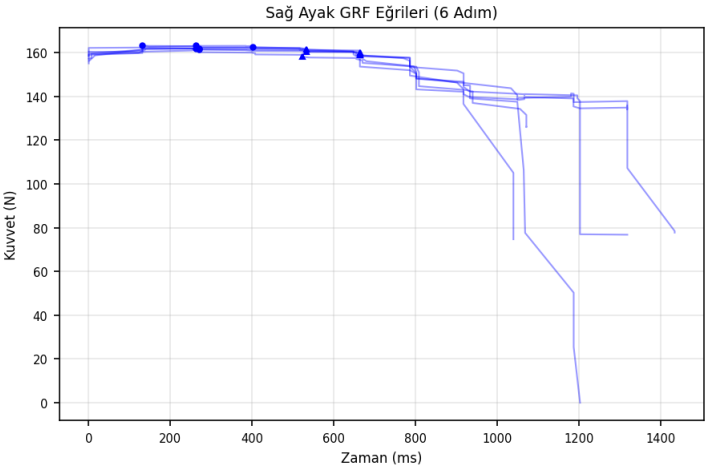


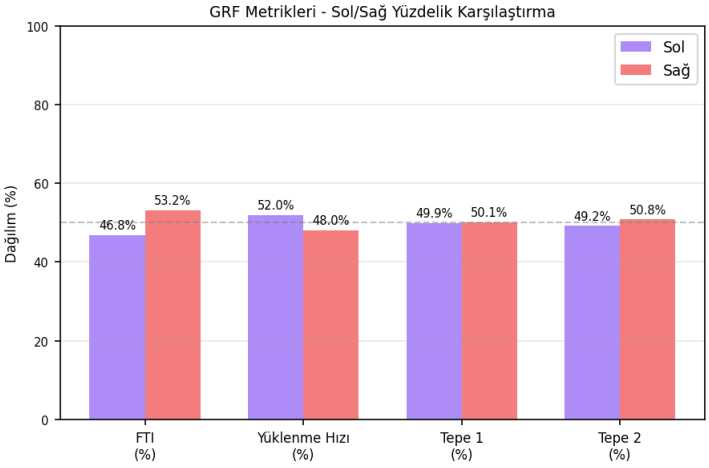


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Yer Tepki Kuvveti (GRF) Analizi







GRF Yüzdelik Özet

```
GRF Yüzdelik Dağılım
============================

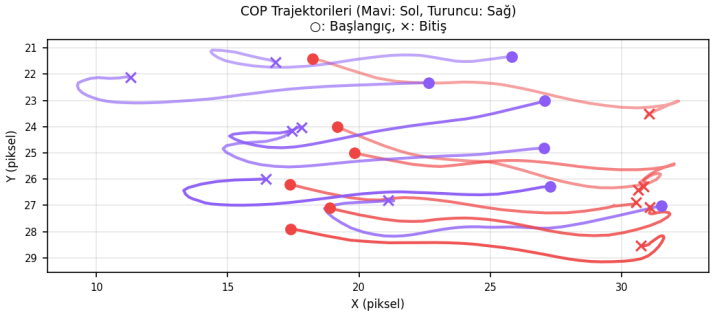
Sol-Sağ Karşılaştırma:

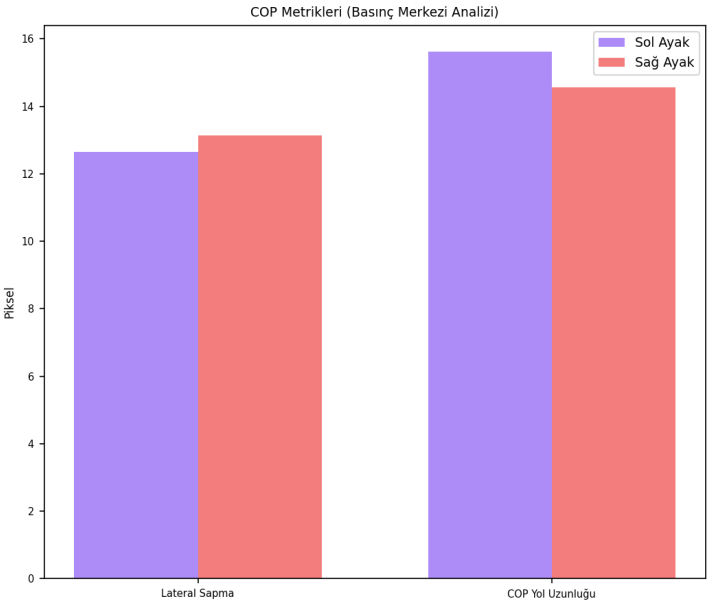
  FTI:           %46.8 / %53.2
  Yüklenme Hızı: %52.0 / %48.0
  Tepe 1:        %49.9 / %50.1
  Tepe 2:        %49.2 / %50.8

------------------------------
* %50/%50 = Simetrik dağılım
* Fark ne kadar azsa o kadar iyi
```


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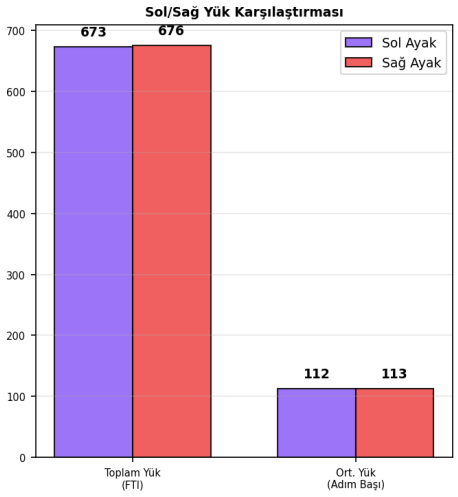
COP Trajektorisi

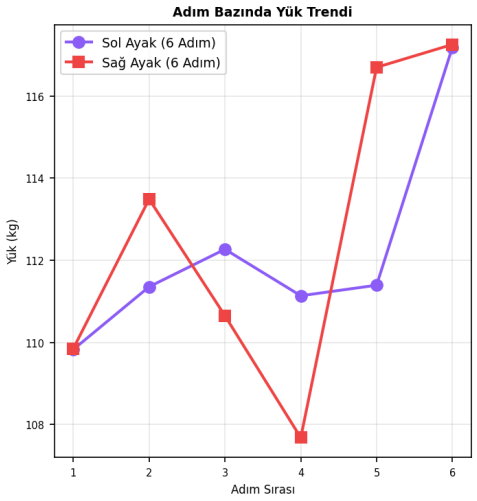


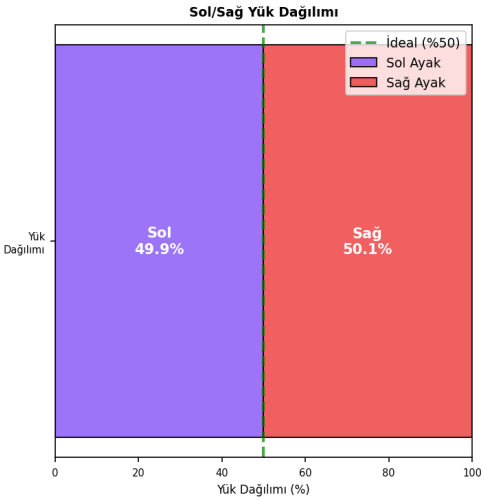


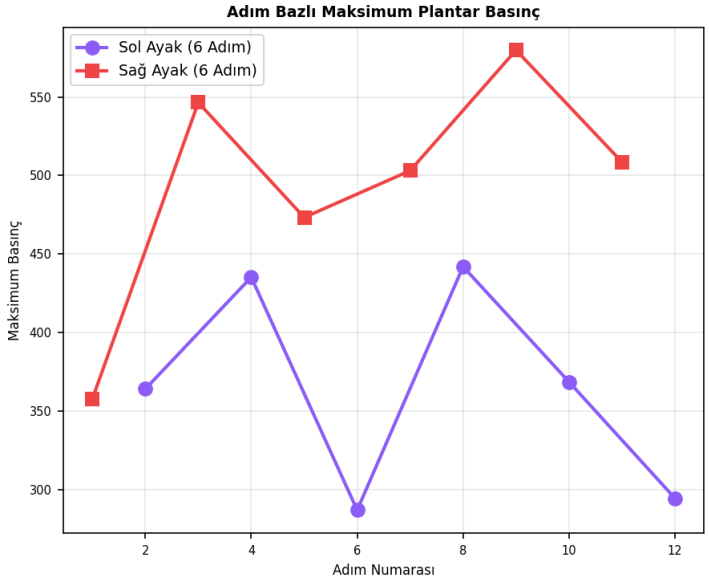
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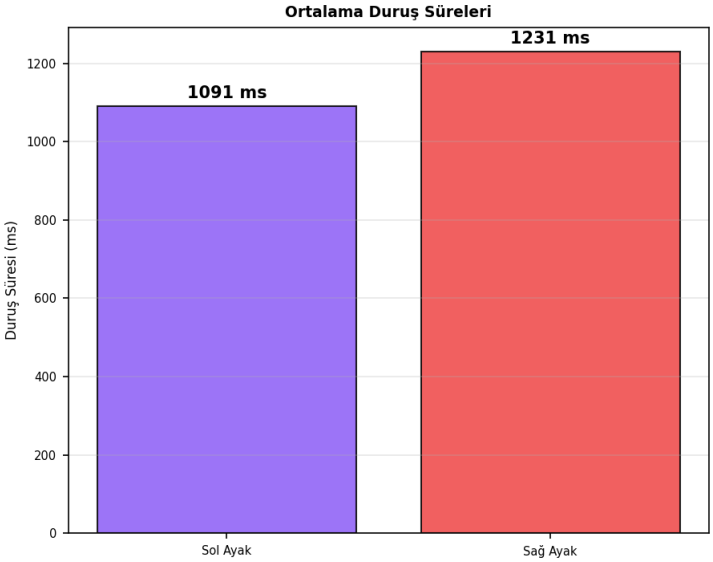
Sol/Sağ Karşılaştırma Grafikleri





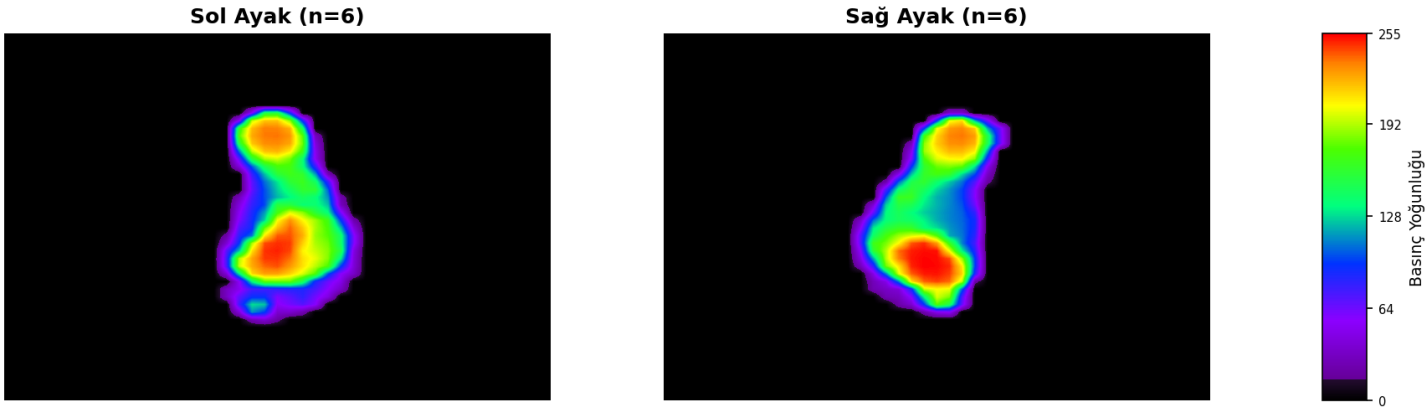


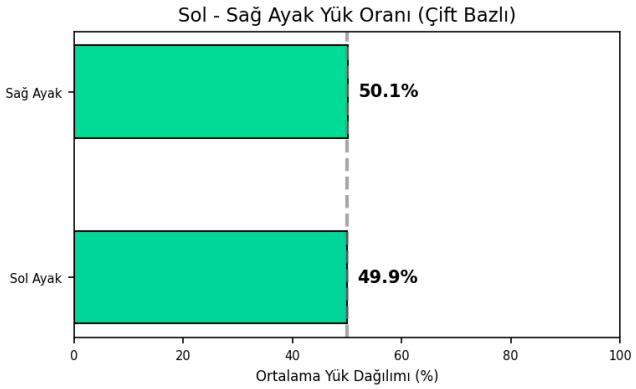


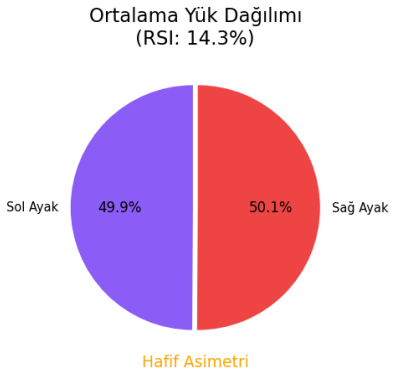


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Sol - Sağ Ayak Karşılaştırması







Toplam Adım: Sol 6, Sağ 6 | Eşleşen Çift Sayısı: 6

Eşleşen Adım Çiftleri Karşılaştırması

Çift	Sol Adım	Sağ Adım	Dağılım (Sol/Sağ)	Simetri
Çift 1	Adım 2	Adım 1	48.7% / 51.3%	5.4%
Çift 2	Adım 4	Adım 3	50.0% / 50.0%	0.1%
Çift 3	Adım 6	Adım 5	50.5% / 49.5%	1.9%
Çift 4	Adım 8	Adım 7	49.6% / 50.4%	1.5%
Çift 5	Adım 10	Adım 9	49.2% / 50.8%	3.0%
Çift 6	Adım 12	Adım 11	49.7% / 50.3%	1.0%

Ortalama Değerler (Çift Bazlı)

Metrik	Sol Ayak	Sağ Ayak
Çift Sayısı	6	6
Yük Dağılımı (%)	49.9%	50.1%

Simetri Değerlendirmesi (Çift Bazlı)

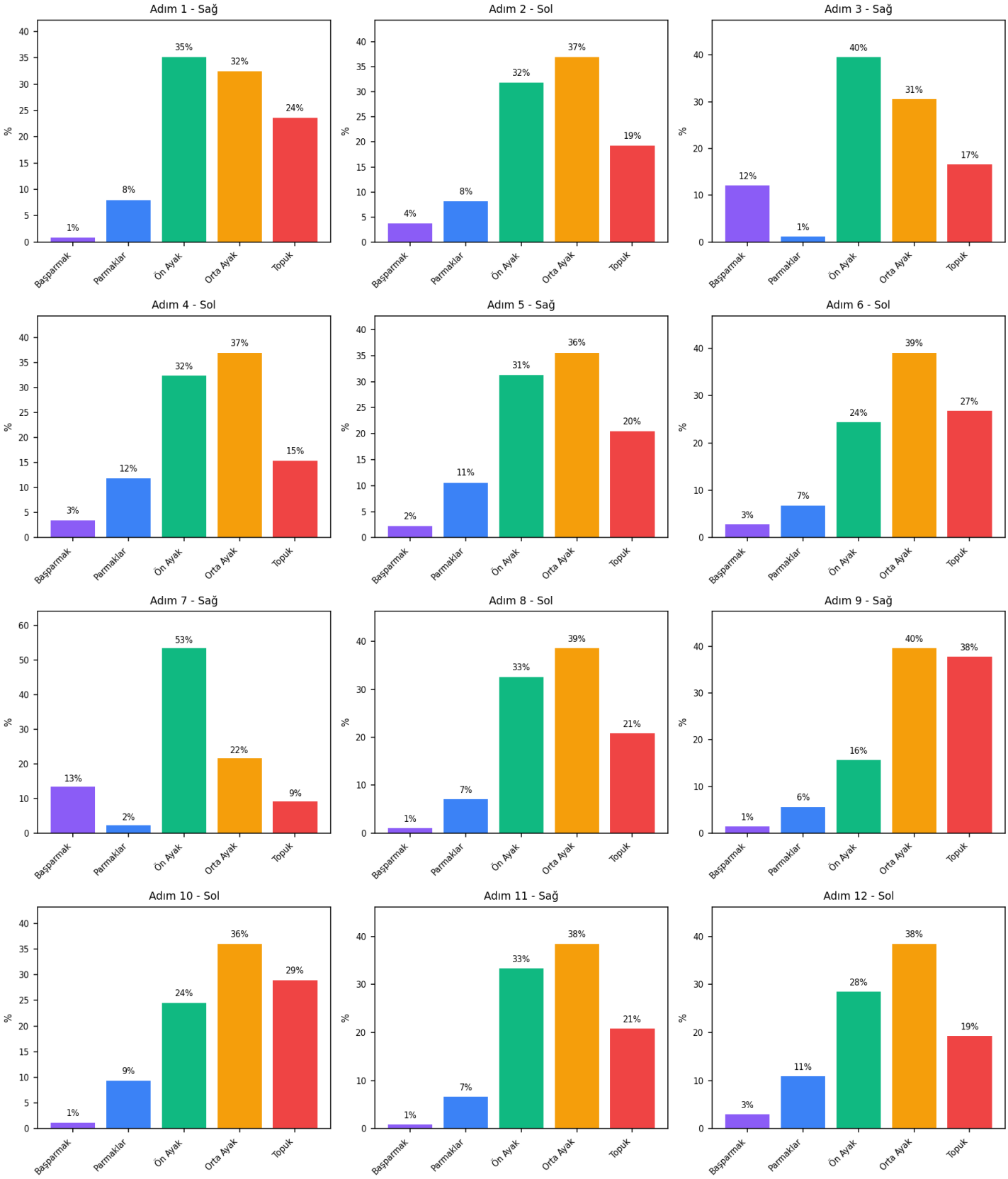
Parametre	Simetri İndeksi (%)
Ortalama Çift Simetrisi	14.3% - Hafif Asimetri

Isı Haritaları: Sol ve sağ ayak birlikte normalize edilmiştir - renk yoğunluğu göreceli basınç farkını gösterir
Çift Bazlı Hesaplama: Her sol-sağ adım çifti karşılaştırılır, sonra ortalama alınır
Robinson SI: |L - R| / (0.5 × (L + R)) × 100 | Referans: <%10 Simetrik, %10-20 Hafif, %20-30 Orta, >%30 Belirgin

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5 Bölge Yük Dağılımı Analizi

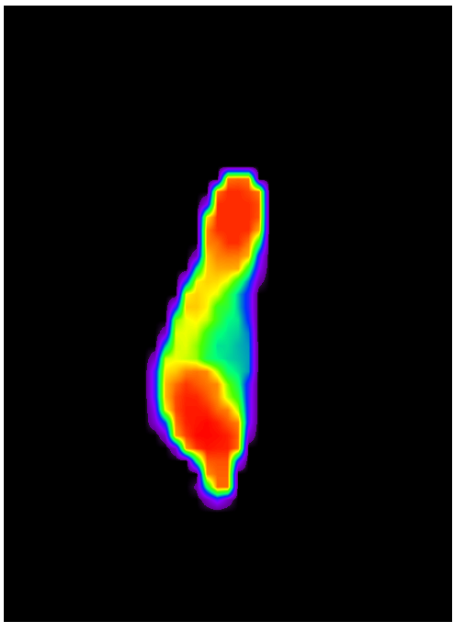
Bölgeler: Başparmak, Parmaklar, Ön Ayak, Orta Ayak, Topuk (Cavanagh & Ulbrecht, 1994)

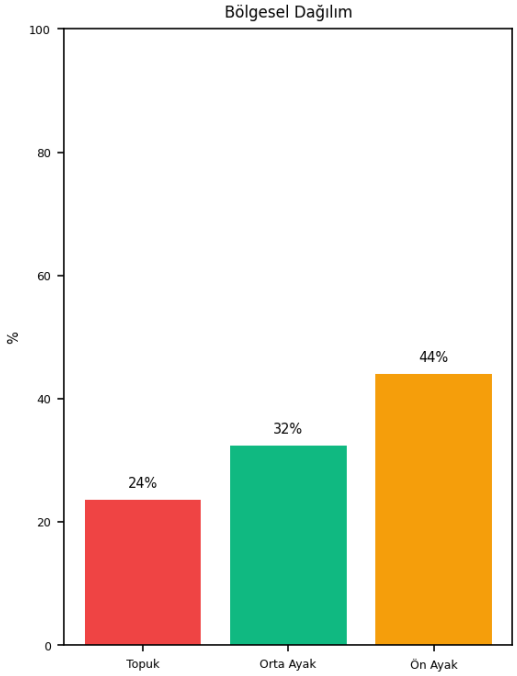


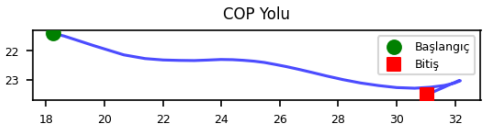
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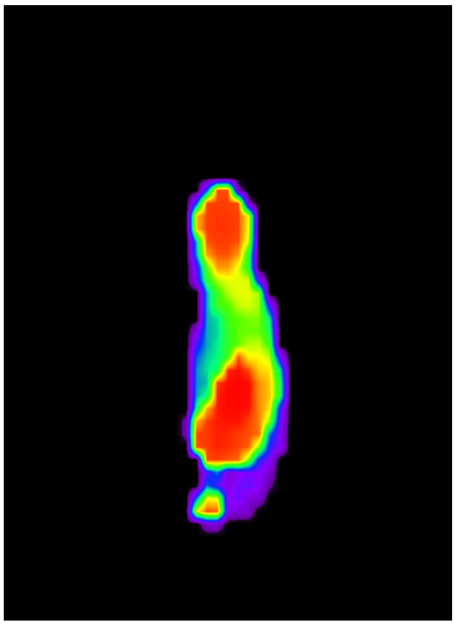
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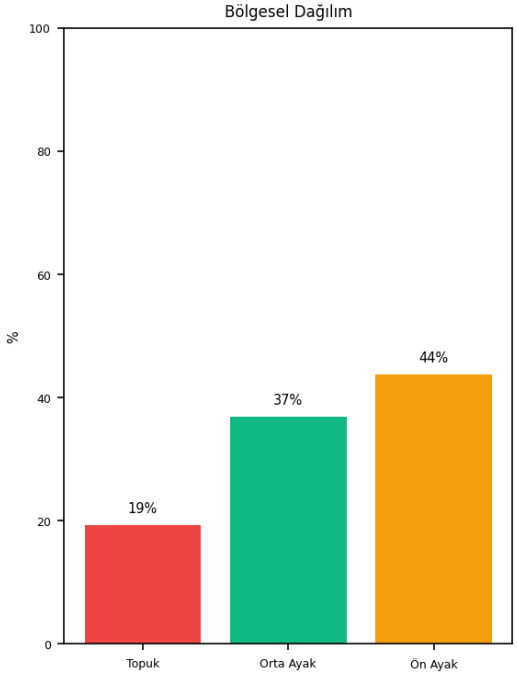


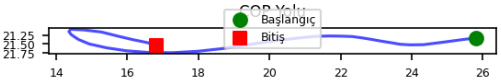




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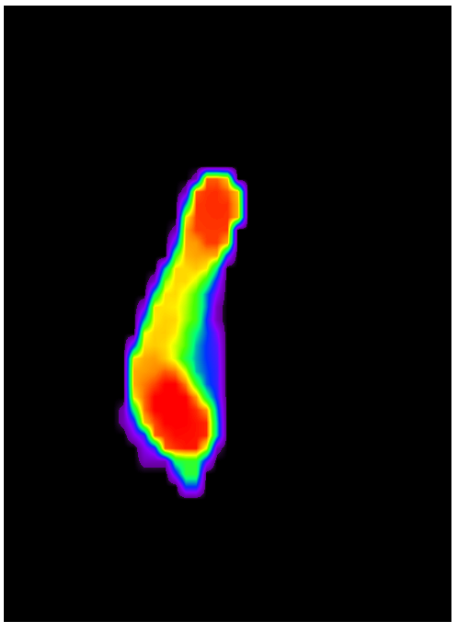


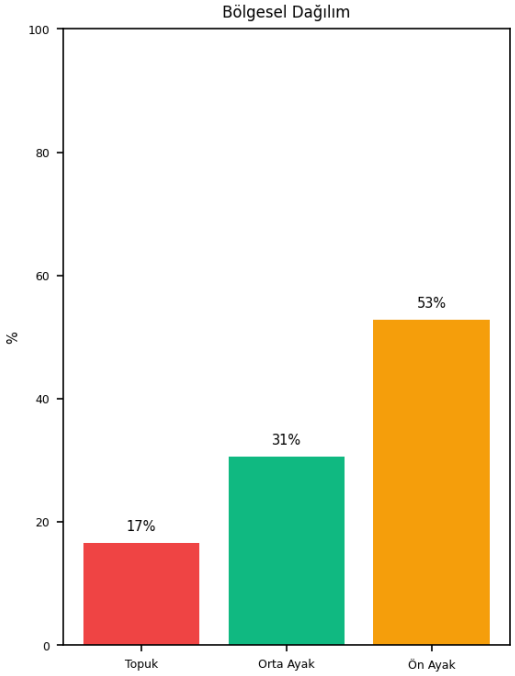


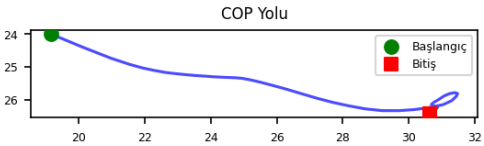
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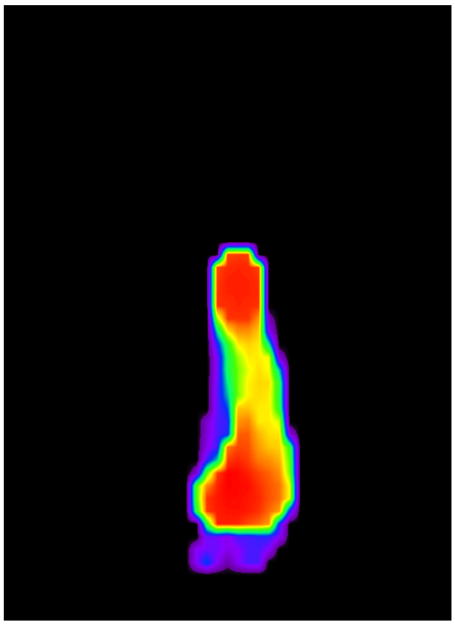
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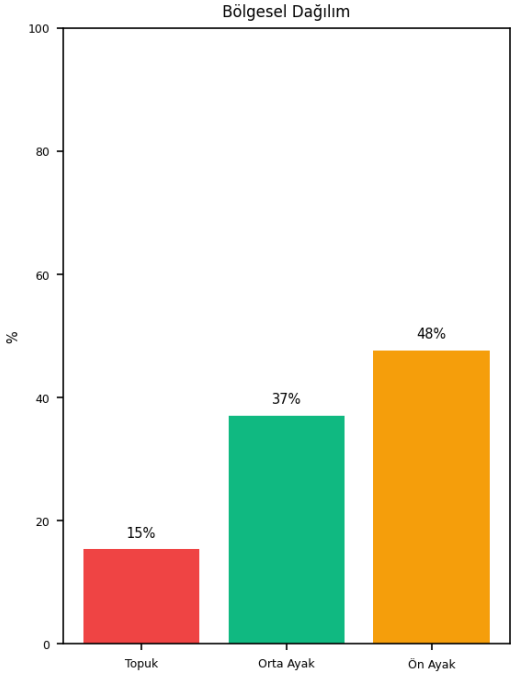


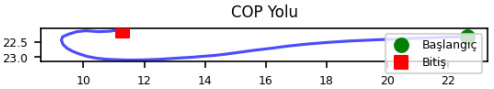




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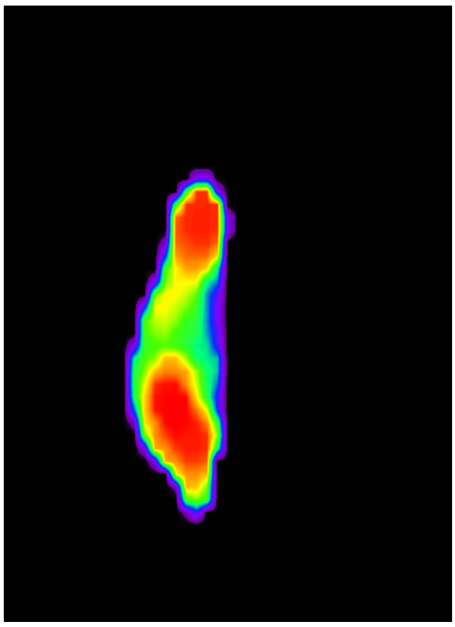


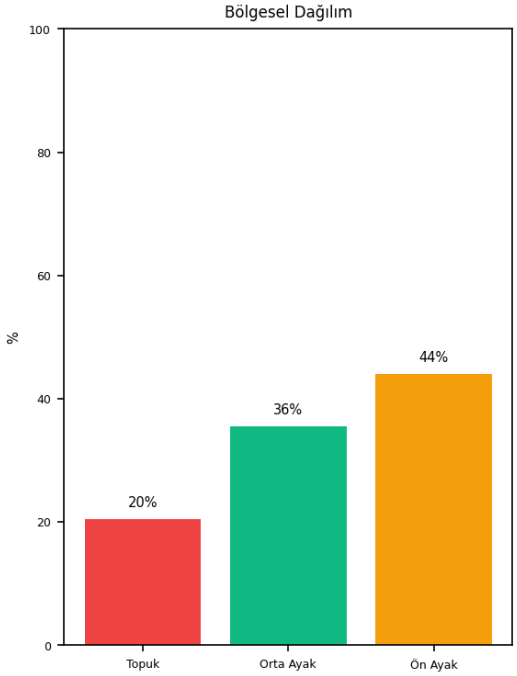


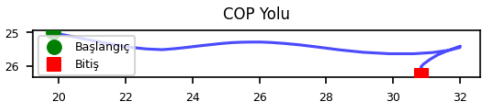
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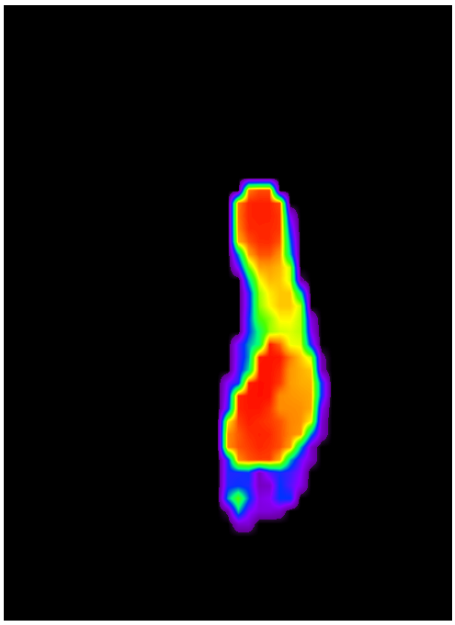
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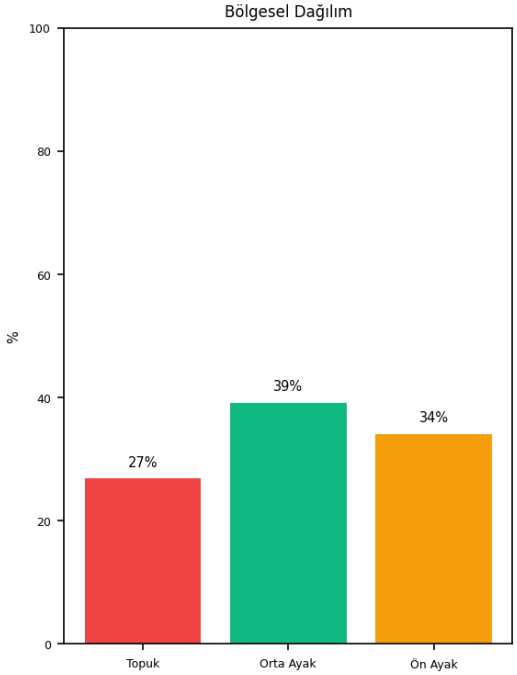


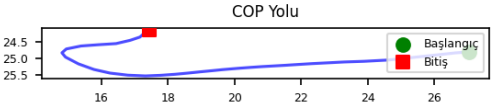




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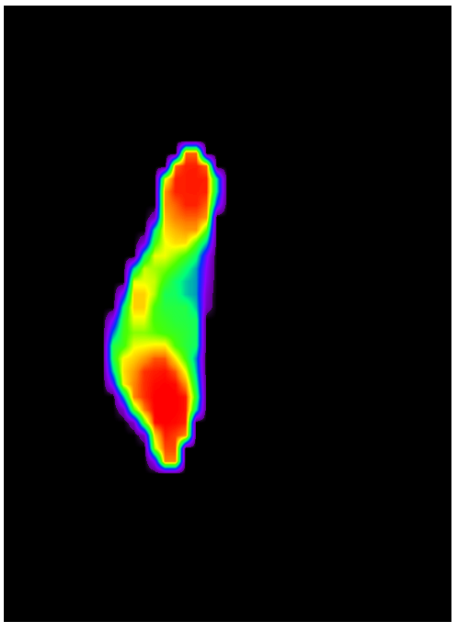


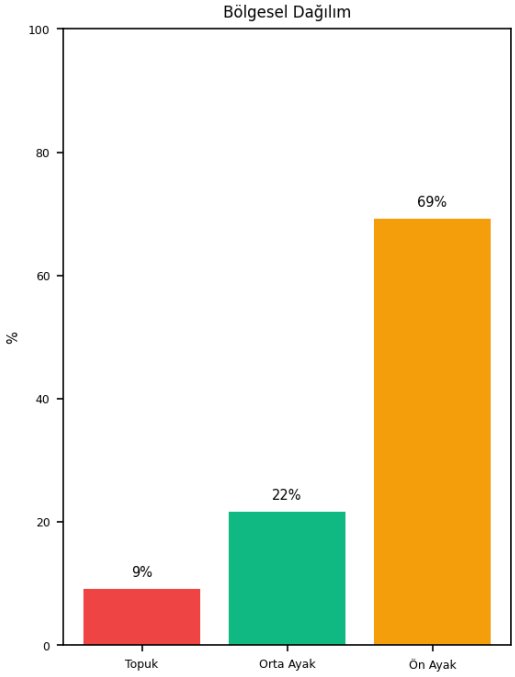


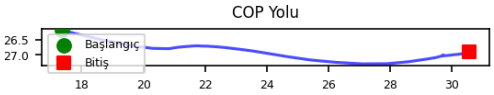
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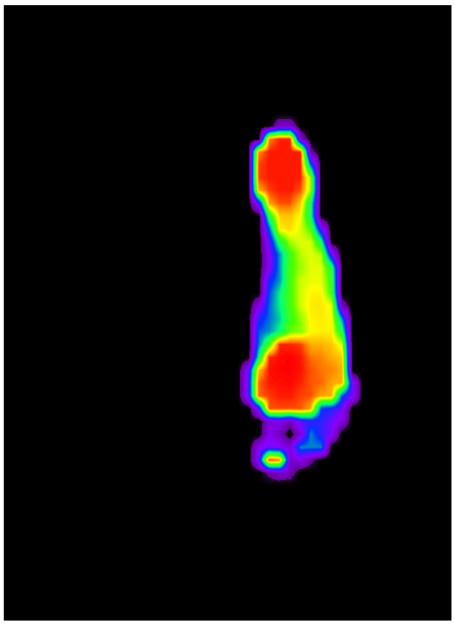
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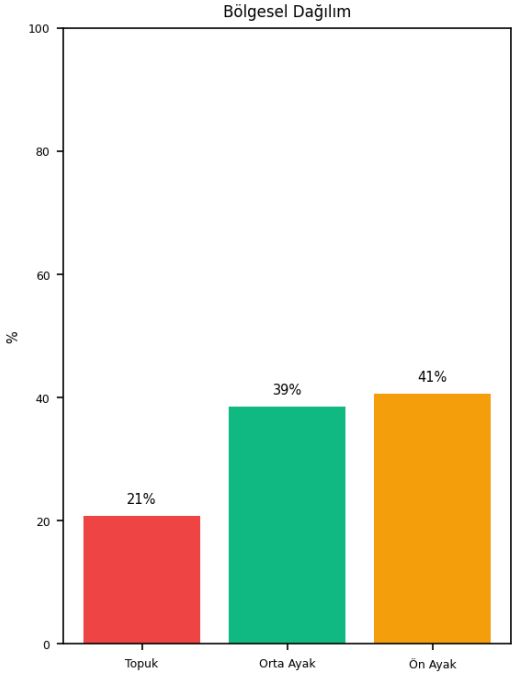


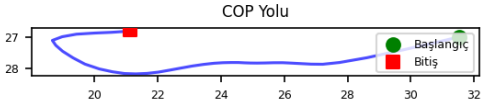




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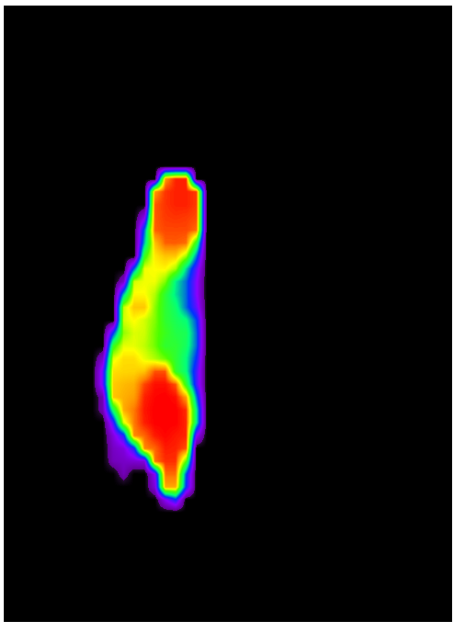


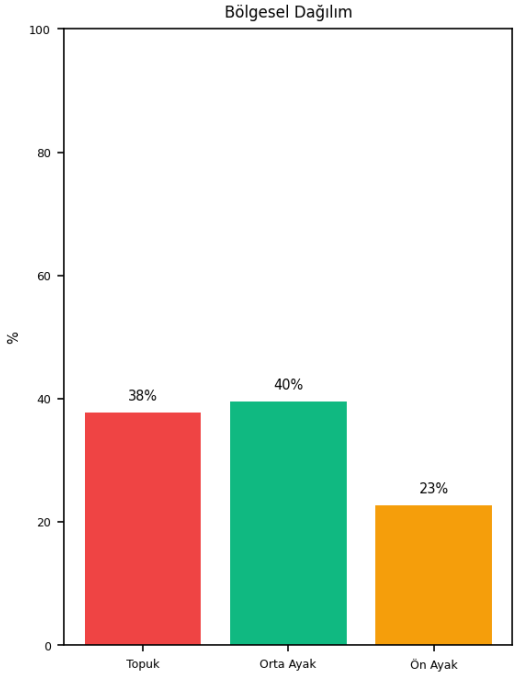


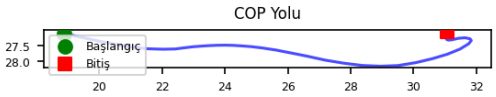
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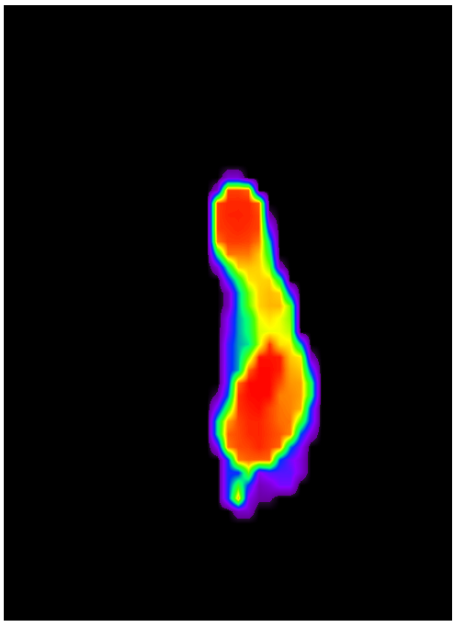
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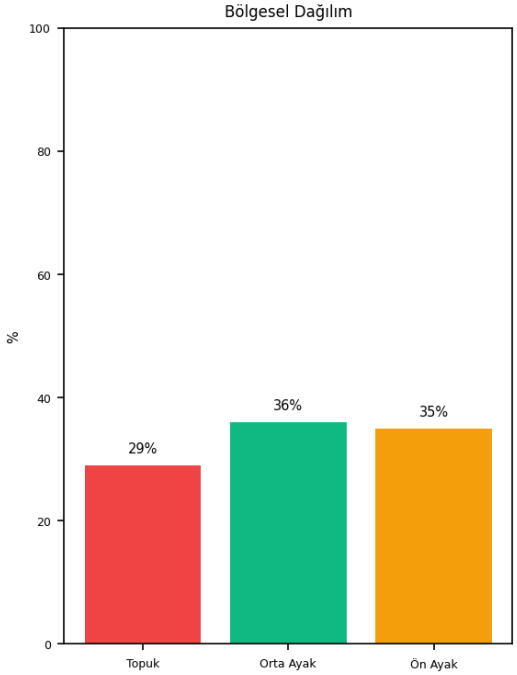


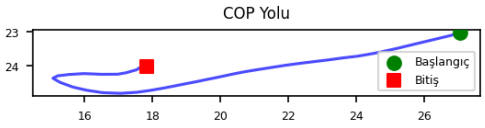




Adım 10 - Sol Ayak



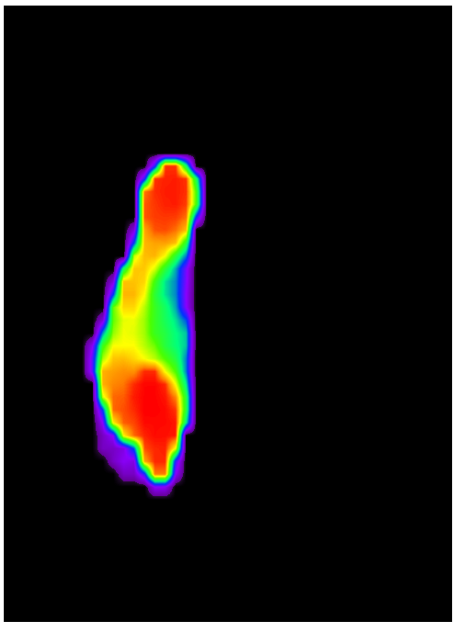


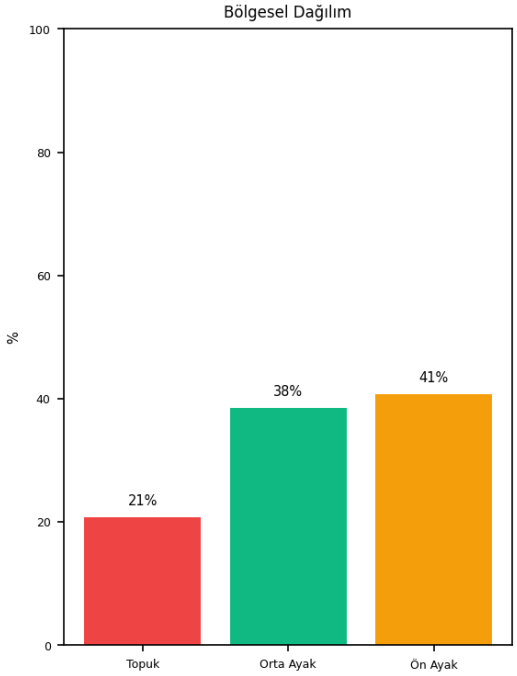


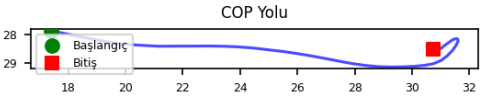
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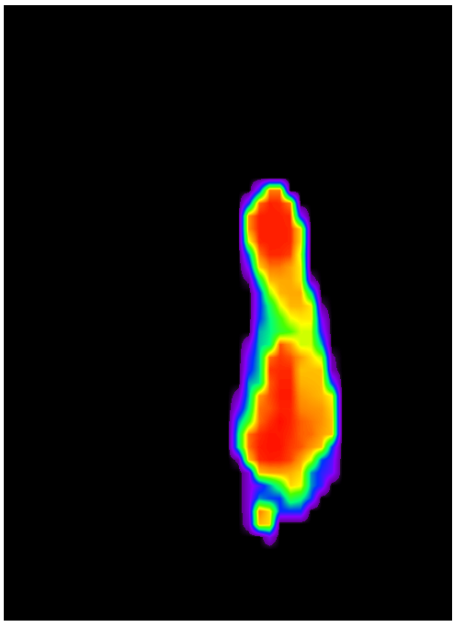
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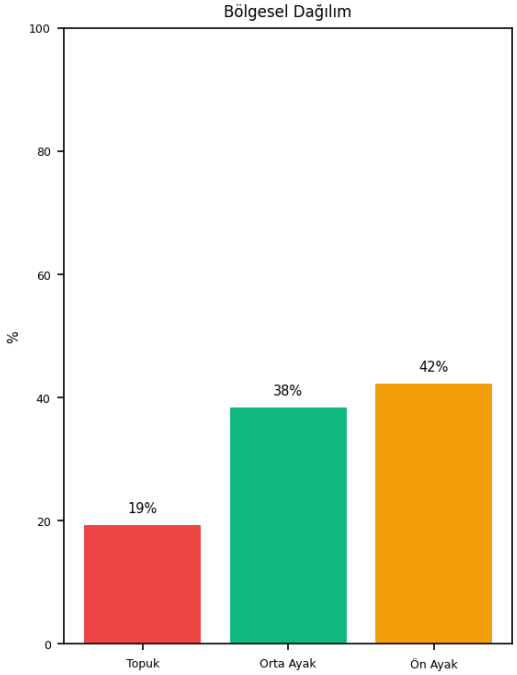


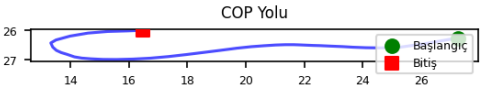




Adım 12 - Sol Ayak







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Denge Testi Raporu

Hasta Bilgileri

Patient ID: 17
Ad: Ahmet Faruk
Soyad: Oflazlar
Yaş: 38
Cinsiyet: M
Boy: 185 cm
Ağırlık: 84 kg
BMI: 24.5 kg/m² (Normal)

Rapor Tarihi: 25.09.2026 14:01

Test Koşulları ve Sonuçlar

Test Tipi	N	Süre (s)	Path (cm)	Sway (cm²)	Speed	ML (cm)	AP (cm)	Süre Durumu
Çift Ayak Açık	1	30.0	20.9	1.8	0.70	0.82	0.61	Optimal
Tek Ayak (L) Açık	1	30.0	232.6	18.8	7.75	1.28	1.92	Optimal
Tek Ayak (R) Açık	1	30.0	257.4	8.7	8.58	0.48	2.42	Optimal

Referans Aralıkları ile Karşılaştırma - Çift Ayak Açık

Metrik	İyi	Orta	Yüksek	Sizin Değeriniz
Yol Uzunluğu (cm)	<40	40-70	>70	20.86 (İyi)
Sallantı Alanı (cm²)	<4	4-8	>8	1.82 (İyi)
COP Hızı (cm/s)	<1.2	1.2-2.0	>2.0	0.70 (İyi)

Referans: Çift Ayak Göz Açık (30s) - Referans Test

Referans Aralıkları ile Karşılaştırma - Tek Ayak Açık

Metrik	İyi	Orta	Yüksek	Sizin Değeriniz
Yol Uzunluğu (cm)	<100	100-180	>180	232.6 (Yüksek)
Sallantı Alanı (cm²)	<20	20-40	>40	18.83 (İyi)
COP Hızı (cm/s)	<5.0	5.0-8.0	>8.0	7.75 (Orta)

Referans: Tek Ayak Göz Açık (15s)

Referans Aralıkları ile Karşılaştırma - Tek Ayak Açık

Metrik	İyi	Orta	Yüksek	Sizin Değeriniz
Yol Uzunluğu (cm)	<100	100-180	>180	257.4 (Yüksek)
Sallantı Alanı (cm²)	<20	20-40	>40	8.75 (İyi)
COP Hızı (cm/s)	<5.0	5.0-8.0	>8.0	8.58 (Yüksek)

Referans: Tek Ayak Göz Açık (15s)

Tüm Denemeler (Detaylı Liste)

#	Koşul	Hedef(s)	Gerçek(s)	Path (cm)	Sway (cm²)	Speed	ML	AP	Zaman
1	Çi A	30	30.0	20.9	1.82	0.70	0.82	0.61	14:00:03
2	Te(L) A	30	30.0	232.6	18.83	7.75	1.28	1.92	14:01:22
3	Te(R) A	30	30.0	257.4	8.75	8.58	0.48	2.42	14:00:43

Açıklamalar: A=Göz Açık, K=Göz Kapalı | Yeşil: Süre >=90% | Sarı: 70-90% | Kırmızı: <70%

Veri Kalitesi Uyarıları

- Tek Ayak, Açık (right): Aşırı yüksek CoP hızı
- Tek Ayak, Açık (left): Aşırı yüksek CoP hızı

Terimler ve Açıklamalar

CoP (Center of Pressure): Basınç merkezi - vücut ağırlığının platform üzerindeki dağılım noktası

Path Length (Yol Uzunluğu): CoP'nin test süresince kat ettiği toplam mesafe. Denge koruma eforunu gösterir.

Sway Area (Salınım Alanı): CoP hareketinin kapladığı %95 güven aralığındaki elips alanı.

Mean Speed (Ortalama Hız): CoP'nin saniyedeki ortalama yer değiştirme hızı.

ML Deviation (Mediolateral): Sağ-Sol yönündeki salınım miktarı. Kalça stratejisi ile ilişkilidir.

AP Deviation (Anteroposterior): Ön-Arka yönündeki salınım miktarı. Ayak bileği stratejisi ile ilişkilidir.

Romberg Ratio: Göz kapalı/Göz açık oranı. Görsel sisteme bağımlılığı ve vestibüler fonksiyonu gösterir.

Bilimsel Metodoloji

Bu raporda sunulan denge parametreleri, yüksek çözünürlüklü FSR (Force Sensitive Resistor) sensör matrisi kullanılarak hesaplanmıştır. FSR matrisleri ayak altı basınç dağılımını statik duruş sırasında ölçer ve bu basınçların uzamsal dağılımından COP (Center of Pressure) konumu elde edilir.

COP'nin zaman içindeki değişimi; Path Length, Sway Area, ML/AP salınımı, COP hızı gibi statik denge parametrelerinin hesaplanmasında uluslararası literatürde standart yöntemdir. Statik postürografi çalışmalarında COP'nin saniyede ≥10 Hz örneklenmesi yeterlidir. Bu sistem, statik duruş sırasında COP salınımını 12-15 Hz aralığında örneklemekte olup klinik denge analizi için bilimsel gereklilikleri karşılamaktadır.

Bu test dinamik yürüyüş içermemekte, yalnızca ayakta durma sırasında vücudun doğal postüral salınımlarını ölçmektedir. FSR tabanlı COP analizi; Romberg testleri, tek ayak duruş testleri ve göz açık/kapalı stabilite değerlendirmelerinde yaygın kullanılan ve bilimsel geçerliliği kanıtlanmış bir yöntemdir.

Klinik Değerlendirme ve Sonuç

Denge testi sonuçları, hastanın statik postural kontrol kapasitesinin farklı sensorimotor koşullar altında değerlendirilmesini sağlamaktadır.

SONUÇ: Sonuçlar, hastanın postural dengesinin değerlendirilmesinde klinik muayene, anamnez ve ilgili laboratuvar bulguları ile birlikte değerlendirilmelidir. Bu rapor bilimsel amaçlarla oluşturulmuş olup, tanı koymak için yeterli değildir. Detaylı klinik değerlendirme uzman hekimden beklenmelidir.

Önemli Uyarı

- Bu rapor yalnızca objektif ölçüm sonuçları içerir ve tanı niteliği taşımaz
- Sonuçların yorumlanması yetkili sağlık personeli tarafından yapılmalıdır
- Referans değerler sağlıklı yetişkin popülasyonuna ait literatür verilerine dayanmaktadır

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