

MUSCULAR SYSTEM CHECKLIST

Kinesiology Study Reference

Date: _____

Head & Neck

Sternocleidomastoid

Splenius Capitis

Masseter

Temporalis

Torso & Back

Pectoralis Major

Latissimus Dorsi

Rectus Abdominis

Trapezius

External Obliques

Erector Spinae

Upper Extremities

Deltoid (Anterior/Medial/Posterior)

Biceps Brachii

Triceps Brachii

Brachioradialis

Lower Extremities

Gluteus Maximus

Rectus Femoris (Quads)

Biceps Femoris (Hamstrings)

Gastrocnemius

Tibialis Anterior

Sartorius

STUDY NOTES / ORIGIN & INSERTION: