

#### **Seated Slump Test**

Structure/sign being tested: Nerve root tension test

Position of Patient: Seated in a chair

Position of examiner: Standing or sitting at side of patient

<u>Procedure</u>: With hip at 90°, the patient performs an active unilateral straight leg raise, extending the knee and dorsiflexing the foot. Finally the cervical spine is flexed

Positive Test Result: Peripheral pain prior to the end of normal ROM, which can be relieved by neck extension

Reference # 4

## Specific Testing/Maneuvers of the Hip & Spine

#### **Straight Leg Raise**

Structure/sign being tested: Nerve root tension test

Position of Patient: Lying supine

<u>Position of examiner</u>: At the side of the patient. One hand grasps the heel and the other hand on the anterior knee to maintain knee extension throughout the test. The test is performed on the involved side

Procedure: While dorsiflexing the foot, the examiner passively flexes the hip until discomfort is experienced or the full ROM is obtained

Positive Test Result: Peripheral pain prior to the end of normal ROM

Reference # 4,9,10

# Specific Testing/Maneuvers of the Hip & Spine

### Faber (Patricks) Test

Structure/sign being tested: SI joint pathology and intraarticular hip pathology

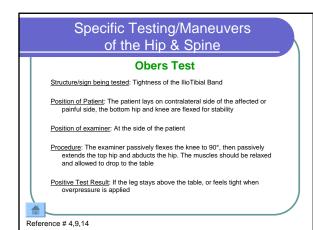
Position of Patient: Lying supine

Position of examiner: Standing in front of the patient

Procedure: The patient is instructed to place one leg in the 'figure 4' position (FABER: flexion, abduction, external rotation). The examiner applies a downward pressure on the leg (above the knee) of the leg that is crossed over

Positive Test Result: Pain in ipsilateral groin is intraarticular hip pathology, pain in SI joint is suggestive of SI joint pathalogy

Reference # 4,9



# Specific Testing/Maneuvers of the Hip & Spine

### **Spurlings Test**

Structure/sign being tested: Cervical nerve roots

Position of Patient: Seated or standing

Position of examiner: In front of or behind patient

<u>Procedure</u>: Extension and rotation of the neck to the affected arm/side. Hold for up to 30 seconds and may add axial load if needed to produce positive finding.

<u>Positive Test Result</u>: Pain, numbness, and/or tingling in spinal distribution peripherally from neck indicates cervical radiculitis or radiculopathy.