

Patient name: _____

Right Left

Inspection

Standing	Upright Crouched Pelvic obliquity	Knee valgus Knee varus Knee neutral	Length difference	Bruise Abrasion Discoloration		Can't stand
Gait	Normal	Antalgic	Can't walk	Trendelenburg	Abd. lurch	
Strength	Toe walk	Heel walk	Can squat			

Palpation

Mass? _____ **Hernia?** Inguinal _____ Femoral _____

Limb length Equal _____ R>L _____ L>R _____

Tender Trochanter, Pubis, ASIS, Iliac Crest, PSIS, Quadriceps, Gluteus, Piriformis, Ischial tuberosity, *Lateral femoral cutaneous nerve*, Other _____

ROM

		Right			Left		
Thomas	_____	Obligatory ER	_____	Thomas	_____	Obligatory ER	_____
Flexion	Prone ext	Abd/Add	IR/ER	Flexion	Prone ext	Abd/Add	IR/ER
_____	_____	_____	_____	_____	_____	_____	_____

Provocative tests

FABER _____ **OBER** _____

Labral testing

FL-IR _____ Ext-ER _____ **Moving labral stress** _____

Neurologic

Stretch Sciatic _____ Femoral _____

DTR Patella _____ Achilles _____

Motor strength Hip flexion Hip abduction Hip ext Hip adduction Knee flexion Knee ext. EHL

5.07

Vascular

Pulses DP _____ PT _____ Popliteal _____

Ulcers