



Checklist for Clinical Examination of the Hip, Pelvis, and Groin

History

Ask questions pertaining to the following:

- ☐ Chief complaint
- ☐ Mechanism of injury
- ☐ Unusual sounds or sensations
- ☐ Type and location of pain or symptoms
- ☐ Previous injury
- ☐ Previous injury to opposite extremity for bilateral comparison

If injury is chronic, ascertain the following:

- ☐ Duration of onset
- ☐ Changes in pain profile
- ☐ Level of irritability
- ☐ Aggravating and easing activities
- ☐ Training history

Observation

- ☐ Visible facial expressions of pain
- ☐ Swelling, deformity, abnormal contours, or discoloration
- ☐ Gait deviations, weight distribution, difficulties with movement
- ☐ Overall stance, limb position, posture, and alignment (anterior, lateral, and posterior)
- ☐ Muscle development and tone—areas of muscular spasm or atrophy
- ☐ Bilaterally compare levels of ASIS and PSIS from the front and side, greater trochanters, and knee creases.

Differential Diagnosis

- ☐ Clear lumbar spine, knee, and ankle.
- ☐ Femoral nerve traction test
- ☐ Examine active ROM—full squat.

Range of Motion

- ☐ Perform active ROM for hip flexion (knee flexed and extended), extension (knee flexed and extended), medial and lateral rotation, and hip abduction and adduction.
- ☐ Perform passive ROM for the active motions listed.
- ☐ Bilaterally compare and note any pain, restricted ROM, or difference in end feel.

Strength Tests

- ☐ Perform manual resistance against the same motions as for active ROM (may immediately follow each active and passive motion).
- ☐ Check bilaterally and note any pain or weakness.

Neurovascular Tests

- ☐ Sensory, motor, reflex of L1-S2
- ☐ Femoral pulse

Special Tests

- ☐ Hip pathology (stress fracture test)
- ☐ Pelvis pathology (Gaenslen's, sacral apex compression, sacroiliac compression, sacroiliac distraction, and Patrick's tests)
- ☐ Alignment (Nélaton's line, Craig's, leg length discrepancy—true and apparent)
- ☐ Muscle tightness (piriformis, Thomas, Kendall, Ober's)
- ☐ Muscle atrophy or weakness (Trendelenburg gait)

Joint Mobility Examination

- ☐ Caudal glide
- ☐ Lateral glide
- ☐ Dorsal femoral glide

Palpation

Bilaterally palpate for pain, tenderness, and deformity over the following:

- ☐ ASIS, iliac crest including insertion of the abdominals and hip abductors, iliac tubercle, greater trochanter, trochanteric bursa
- ☐ Inguinal ligament, femoral triangle borders and contents, pelvic tubercles
- ☐ Abductor, hip flexor, and adductor muscle groups and insertions
- ☐ PSIS, ischial tuberosity, piriformis and sciatic nerve, sacroiliac joint, sacrotuberous ligament
- ☐ Gluteus maximus
- ☐ Hamstrings (proximal origin on ischial tuberosity)

Functional Tests