

PT Clinical Exam: Differential Diagnosis of Posterior Thigh Pain

<p>Physical Therapy Clinical Exam</p>	<p><u>Sources of Information:</u></p> <ul style="list-style-type: none"> • History Questions & Symptom Behavior • AROM • PROM (with overpressure) • MMTs/Resisted Tests • Palpation • Special Tests 	<p><u>“SINSS” Model* (Maitland, 2013):</u></p> <ul style="list-style-type: none"> • Severity • Irritability • Nature • Stage • Stability <p>*Guides clinical reasoning for how aggressive exam and treatment should be, guides clinical prognosis</p>
	<p>Hamstring Injury</p>	<p>Sciatic Nerve Irritation</p>
<p>SUBJECTIVE EXAM</p>		
<p>Mechanism of Injury (MOI)/Onset</p>	<p>High force eccentric load/deceleration (tends to be Acute)</p> <ul style="list-style-type: none"> • Sprinting, jumping <p>Overuse tendinopathy (high hamstring tendon) (tends to be Chronic)</p> <ul style="list-style-type: none"> • Distance running, sprinting, jumping sports 	<p>History of prior hamstring injury OR low back pain</p> <ul style="list-style-type: none"> • Ischial tuberosity area impingement of sciatic nerve • Lumbosacral nerve root irritation <p>Non-specific/insidious onset (tends to be Chronic)</p> <ul style="list-style-type: none"> • Theorize increase in compression (e.g., increased sitting) or tensile loading of the nerve <p>(Could cause local ischemia to nerve)</p>
<p>SYMPTOM BEHAVIOR</p>		
<ul style="list-style-type: none"> • Pain Quality, Description, Location 	<p>Pain Descriptors:</p> <ul style="list-style-type: none"> • Sharp if acute injury > evolving to dull/ache • Usually intermittent, correlates with tendon loading <p>Pain Location:</p> <ul style="list-style-type: none"> • Usually well localized at hamstring muscle belly or tendon, increase in chronicity could lead to more pain “spreading” or diffuse pain <p>(*See this post for more on characteristics of tendinopathy symptom behavior):</p> <p>Tips for Treating Lower Extremity Tendinopathy: Part 1 Assessment</p>	<p>Pain Descriptors:</p> <ul style="list-style-type: none"> • Burning/Shooting • Radiating • Numb/Tingling • Usually intermittent, correlates with nerve irritation/provocation <p>Pain Location:</p> <ul style="list-style-type: none"> • Buttock, posterior thigh, could radiate to foot • Pain usually more diffuse, less localized and well defined
<ul style="list-style-type: none"> • Aggravating Factors 	<p>High “Cyclic-Loading” Activities (movements that induce stretch-shortening cycle of tendon):</p> <ul style="list-style-type: none"> • Long strides (walking or running) 	<p>Positions of “Neural Tension”</p> <ul style="list-style-type: none"> • Forward bending (straight knees) • Straight leg raise (SLR) (passive or active)

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	<ul style="list-style-type: none"> Quick lower body movements <ul style="list-style-type: none"> Cutting, running, jumping <p>Positions placing hamstring on stretch/tension</p> <ul style="list-style-type: none"> Forward bending (straight knees) Straight leg raise (SLR) (INDEPENDENT OF ANKLE POSITION) <p>NO Pain with SITTING!</p>	<ul style="list-style-type: none"> Sitting in lumbar flexion (slouched) Cervical flexion (if highly irritable) <p>Positions of "Neural Compression"</p> <ul style="list-style-type: none"> Sitting on hard surfaces Shifting more weight to affected side buttock <p>Increased Pain with SITTING!</p>
<ul style="list-style-type: none"> Easing Factors 	<ul style="list-style-type: none"> Avoiding above positions Rest, ice, NSAIDs Heat (maybe) 	<ul style="list-style-type: none"> Avoiding above positions Rest, NSAIDs (maybe), neuropathic medications Nerve glides/flossing
OBJECTIVE EXAM		
AROM/PROM	AROM/PROM/ MMTs/Resisted Tests	AROM/PROM
Manual Muscle Tests (MMTs) & Resisted Tests	<p>Tendon pain characterized by pain with "Active contraction and Passive stretch" (Cyriax, 1982)</p> <ol style="list-style-type: none"> Pain with active/resisted knee flex and/or hip extension Pain with passive knee extension and hip flexion (independent of ankle position) (passive SLR) 	<p>Pain with passive knee extension and hip flexion (independent of ankle position) (passive SLR)</p> <p>MMTs/Resisted Tests</p> <ul style="list-style-type: none"> Could have pain with resisted/active hamstring contraction, though unlikely to be as clear of a pattern, pain more likely to be more diffuse Unlikely to test weak in specific muscle groups or pattern
Palpation	Pain with hamstring muscle/tendon palpation	Pain with nerve palpation/pressure
Special Tests	SEE TABLES BELOW	SEE TABLES BELOW