

# Hip Examination

## Prepare patient

- Introduction
- Position supine on bed

## General Principles of Joint Exam

*Check if any pain, then look, feel, move, measure & compare with other side, & assess function.*

## Look

### *General inspection*

- Obvious other joint disease

### *Hips*

- Compare posture of both legs - any rotation, contractures
- Leg lengths
  - True leg length (ASIS to medial malleolus)
  - Apparent leg length (umbilicus to medial malleolus)
  - If difference between true lengths suggests likely hip disease on shorter side
  - If difference between apparent lengths only then pelvis tilted

## Feel

*Joint tenderness* - just distal to midpoint of inguinal ligament

*Level of greater trochanters* - should be equal - thumbs on ASIS & index/middle fingers can feel greater trochanter tips posteriorly.

## Move

### *Movements:*

- Passive:
  - Flexion (120° with knee flexed and examiner holds other leg down keeping pelvis on bed)
    - Thomas' test - Fully flex both hips to straighten pelvis, if a leg cannot be extended fully (whilst the other hip remains fully flexed) then there is a fixed flexion deformity.
  - Internal rotation (45°)
  - External rotation (45°) - cross leg with calf over opposite knee/thigh
  - Abduction (50°)
  - Adduction (45°)

*Trendelenberg test* - stand on one leg & opposite hip should elevate unless proximal myopathy or hip disease.

## Function

*Gait:* Watch for abnormalities, limp, walking aid