Hip Scour Test

Date:	Name:	Age:
Symptoms/concerns (if needed):		
Relevant medical history or info	rmation (if needed):	

The Hip Scour Test is a physical examination technique used to assess the hip joint's range of motion and stability. It involves moving the hip joint through a range of motion while applying downward pressure on the hip joint to detect any pain, clicking, or catching sensation.

Equipment needed	
Examination table	
1 4 0	

Instructions

- 1. Have the patient lie down on their back on the examination table, with their legs straight out in front of them.
- 2. Ask the patient to bend one leg at the knee and bring the foot towards the buttock, keeping the other leg straight.
- 3. Place one hand on the patient's knee and the other hand on the ankle, stabilizing the leg to prevent it from moving too much.
- 4. Gently rotate the hip joint, moving the patient's bent knee in a circular motion. Start with small movements and gradually increase the range of motion.
- 5. Apply downward pressure on the patient's knee as you rotate the hip, pushing down gently to create a "scouring" motion.
- 6. Repeat the test on the other side.
- 7. Observe the patient's reactions throughout the test, noting any pain, clicking, or catching sensation.

Reminders

- Be gentle when performing the test, and do not force the joint beyond its natural range of motion.
- If the patient experiences pain during the test, stop immediately and re-evaluate the joint before proceeding.
- The Hip Scour Test should be performed in conjunction with other clinical and imaging tests to arrive at an accurate diagnosis.
- Document the results of the test on this template or the patient's medical record, along with any other relevant findings.

Results
Positive: Indicates that the hip flexors are weak and unable to generate enough force. This could be from a lack of strength or mobility or an underlying injury. A positive result is present if the patient feels any pain.
Degree of flexion that symptoms are reproduced:
Negative: Indicates that the hip flexors are strong and capable of generating enough to perform activities. A negative result is due to flexion-adduction to flexion-abduction in an arch, with a normal ROM (range of motion) and a normal feeling.
Additional notes

Wong, S. E., Cogan, C. J., & Zhang, A. L. (2022). Physical examination of the hip: Assessment of femoroacetabular impingement, labral pathology, and microinstability. *Current Reviews in Musculoskeletal Medicine*, *15*(2), 38–52. https://doi.org/10.1007/s12178-022-09745-8