

# Hoover Test

<b>Patient's name:</b> Helen Carter	<b>Age:</b> 62
<b>Gender:</b> Female	<b>Date:</b> Nov. 19, 2024
<b>Examiner:</b> Emily Rodriguez	
<b>Test procedure:</b>	
<div><ol style="list-style-type: none"><li>1. Have your patient lie down or be in a supine position on an examination table.</li><li>2. Stand at the feet of the patient and cup the calcane (heel) of each foot of the patient. Your left hand must be grasping their right heel and your right hand must be grasping their left heel.</li><li>3. Ask the patient to press their heels down against your hands. You must feel pressure on the unaffected side.</li><li>4. Grasp the patient's heel on the unaffected side to apply downward pressure.</li><li>5. Ask the patient to raise the unaffected leg against the pressure. Observe for pressure under the affected leg.</li><li>6. Repeat steps 4 and 5 to the opposite side.</li></ol></div>	
<b>Results</b>	
<div><div><input type="radio"/></div><div><b>Negative:</b> There is no pressure under the feel of the affected leg when the patient raises the unaffected leg against resistance.</div></div> <div><div><input checked="" type="radio"/></div><div><b>Positive:</b> Pressure is felt under the affected leg when the unaffected leg is raised, and no pressure is felt under the unaffected leg when the affected leg is raised.</div></div>	
<b>False positives</b>	
<div><ol style="list-style-type: none"><li>1. <b>Pain in the affected leg:</b> If a patient experiences pain in the hip or lower limb, it may lead to greater weakness during testing, which can be misinterpreted as non-organic weakness rather than a response to pain.</li><li>2. <b>Cortical neglect:</b> Patients with conditions such as conversion disorder may exhibit symptoms of neglect, where they fail to use one limb despite having intact strength. This can result in a false positive Hoover sign.</li><li>3. <b>Organic disease:</b> Individuals with underlying neurological conditions (e.g., multiple sclerosis) might inadvertently produce a positive result due to their disease affecting motor function .</li><li>4. <b>Patient behavior:</b> Some patients may attempt to "help" or "convince" the examiner of their illness, which can lead to inconsistencies in test performance.</li><li>5. <b>Apraxia:</b> Neurological deficits like apraxia can complicate the interpretation of results, as patients may struggle to perform voluntary movements even if they have preserved strength.</li></ol></div>	

### **Additional notes**

The patient was referred for further neurological evaluation to rule out underlying organic conditions such as multiple sclerosis or structural motor impairments.

Advised a follow-up session for psychosocial assessment due to suspected functional neurological disorder.

Cock, H. R., & Edwards, M. J. (2018). Functional neurological disorders: acute presentations and management. *Clinical Medicine*, 18(5), 414–417. <https://doi.org/10.7861/clinmedicine.18-5-414>

Kaufman, D. M. (2006). *Clinical neurology for psychiatrists*. Saunders/Elsevier.

Koehler, P. J., & Okun, M. S. (2004). Important observations prior to the description of the Hoover sign. *Neurology*, 63(9), 1693–1697. <https://doi.org/10.1212/01.wnl.0000142977.21104.94>