Straight Leg Raise Test (SLR Test)

Patient's full name:

Date administered:

Clinician's full name:

Assistant's full name (if applicable):

What you need:

- A comfortable examination bed for your patient
- Optional: goniometer
- Optional: an assistant to use the goniometer to measure angles

Instructions:

1. Prepare the examination bed.
2. Have your patient lie down on the bed in a supine position (lying face up). Make sure that their legs are straightened and their feet are pointing upward.
3. Position yourself on the side of the patient (the side with the leg you are examining).
4. Use one of your hands to grasp the patient's ankle.
5. Place your other hand on the knee to provide support.
6. Slowly lift the leg upward while keeping the knee extended. While you are doing this, observe the patient's face to check for signs of discomfort.
7. Make sure to observe the angle of the leg. If the patient shows signs of discomfort or actually tells you they are in pain when you raise their leg and reach a certain angle, that may be indicative of what the possible issue is. If you have someone who can measure the angle with a goniometer while you perform the technique, that would be great!
8. Make sure to perform the test on the other leg.

Left leg:

☐ **Positive**

☐ **Negative**

Right leg:

☐ **Positive**

☐ **Negative**

Interpretations

If the patient does not feel any pain or does not show any signs of discomfort throughout the test, then they are **negative**.

The patient is **positive** if they feel:

- Pain below the knee.
- Pain between 30-70 degrees of flexion. This may be indicative of a lumbar disc herniation.
- Pain when the flexion is over 70 degrees. This may be indicative of hip pathologies or sacroiliac joint pathologies, tightness of hamstrings, tightness of the gluteus maximus, or tightness of the hip capsule.

Course of action if positive: endorse the patient for a comprehensive examination

Course of action if negative: physical therapy (if their pains are mild), or nothing because they are fine

Additional Comments: