Trendelenburg Test

Patient's Name:	Date:

Objective

The objective of performing Trendelenburg's test is to assess the strength of the hip abductor muscles and the integrity of the superior gluteal nerve.

This test is commonly used to evaluate patients with suspected hip or pelvic girdle pathology, including hip arthritis, hip dysplasia, and nerve entrapment syndromes. Trendelenburg's test can aid in the diagnosis, treatment planning, and overall patient care by identifying weakness or compensation of the hip abductor muscles.

Instructions

1. Ask the patient to stand on one leg, flexing the other at the hip and knee. Instruct the patient to lift one leg up, bending it at the knee to 90 degrees while keeping the other foot planted on the ground.
2. Observe the position of the pelvis, particularly the side of the lifted leg. Stand behind the patient and observe the position of the pelvis. Look at the level of the iliac crest on the side of the lifted leg and the opposite side.
3. Look for the pelvic drop. If the pelvis on the lifted leg side drops below the level of the opposite side, it suggests the weakness of the hip abductor muscles on the lifted leg side, and it's considered a positive Trendelenburg sign.
4. Look for the pelvic rise. If the pelvis on the lifted leg side rises above the level of the opposite side, it suggests that the hip abductor muscles on the contralateral side are compensating, and it's considered a negative Trendelenburg sign.
5. Repeat on the other leg: Repeat the same steps on the other leg to assess for symmetry.
6. Record the test results, including whether positive or negative and which leg was affected.

Result Interpretation

- A **positive Trendelenburg** sign is indicated by a pelvis dropping on the lifted leg side below the level of the opposite side. This suggests the weakness of the hip abductor muscles on the lifted leg side or dysfunction of the superior gluteal nerve.
- A **negative Trendelenburg** sign is indicated by a rising of the pelvis on the lifted leg side above the level of the opposite side. This suggests a compensation of the hip abductor muscles on the contralateral side. It's important to note that Trendelenburg's test should be interpreted in conjunction with other clinical findings to arrive at a definitive diagnosis.

Notes