

Focused musculoskeletal and neurological examination⁸

- **Observe gait and pain behaviour**
- **Observe the spine for deformity/abnormal curvature**
- **Palpate the bony spine and paraspinal muscles**
- **Assess range of spine motion (standing): flexion, extension, lateral flexion and rotation**
 - Pain on flexion that radiates to the leg may be disc herniation with nerve root impingement
 - Pain on extension may be facet arthropathy or spinal stenosis
- **Examine active and passive movement of the hips (supine)**
 - Normal range of motion: 130° flexion, 15° extension, 45° internal/external rotation
 - Pain in any of these movements suggests hip pathology
- **Straight leg raise**
 - Positive if radicular pain is reproduced at 60° or less
 - Pain indicates sciatic nerve or L4-S2 nerve root irritation
- **Assess lower limb sensation**
- **Assess lower limb reflexes**
- **Femoral stretch test (prone)**
 - Positive if radicular pain is reproduced between 80 and 100°
 - Pain indicates femoral nerve or L2-L4 nerve root irritation
- **Consider a general examination where indicated**