Puranen-Orava Test

Name:	Date of birth:
Examiner:	Date of examination:
Pre-test checklist	
Ensure the patient is wearing appropriate clothing for the test.	
Confirm the patient has no contraindications for the test (e.g., recent surgery, severe pain).	
Relevant medical history	
Previous hamstring injuries:	
□ Yes	
🗆 No	
Other relevant conditions:	
Sciatica	
Lower back pain	
Other:	
Test procedure	
1. Ask the patient to stand with the hip flexed as	close to 90 degrees as possible and the knee of
the symptomatic leg extended, foot resting on an elevated surface.	
2. Instruct the patient to lean forward while keeping the knee of the symptomatic leg fully extended.	
3. The patient should reach as far forward as po	ssible, aiming to touch their toes.
4. Carefully observe the patient's movement and	facial expressions for any pain or discomfort. You
may also ask the patient to indicate if they exp	perience any pain or discomfort during the test.
Test results	
Positive: Pain elicited in the posterior thigh o	r buttocks; suggests proximal hamstring

tendinopathy.

Negative: Absence of pain.

Patient signature: _____ Examiner signature: _____