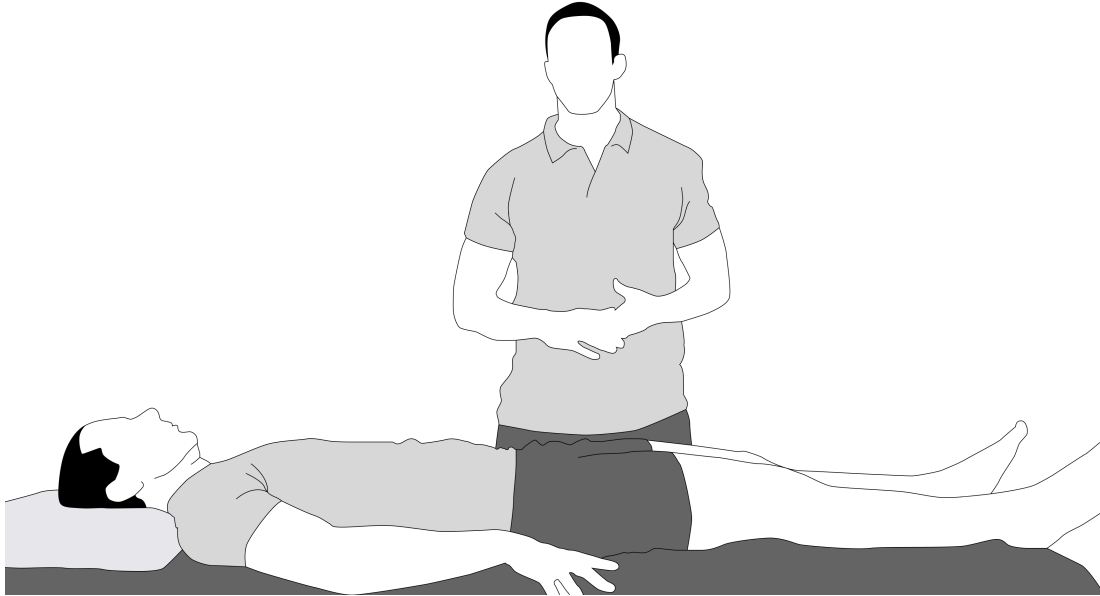


Thomas Test

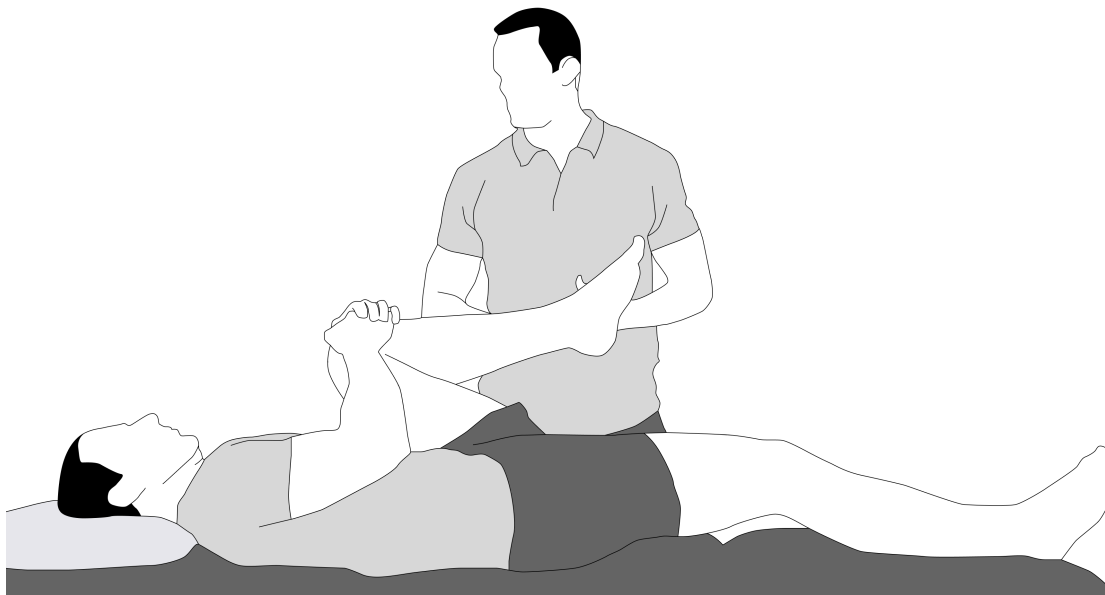
Name: _____ Date: _____

Instructions

1. Lie your patient flat on their back on an examination table or any flat surface with their legs straight. Ensure that your patient is in the proper pelvic position for accurate testing and account for the patient's pelvic tilt for accurate results.



2. Gently lift your patient's leg to a 90-degree angle. Keep the knee straight.
3. Passively flex one of the patient's legs toward their chest. Ensure that the other leg is relaxed.



4. Observe the position of the patient's opposite leg.
5. Record results.
6. Repeat the test on the other leg.

Results

Positive (check one):

Posterior thigh does not touch the table; the knee is fully extended, indicating shortness in both one-joint and two-joint hip flexors.

Posterior thigh touches the table; knee extends, indicating shortness in two-joint hip flexors.

If the posterior thigh does not touch the table and the knee flexes beyond 80°, it suggests shortness in one-joint hip flexors.

If there is abduction of the thigh during hip extension, lateral deviation of the patella occurs, and knee extension is maintained when abduction/adduction is restricted. This indicates shortness in the tensor fasciae latae.

If there is abduction, flexion, external rotation of the hip, and flexion of the knee, a combination of three or more of these factors suggests tightness, indicating shortness in the sartorius.

Negative: The posterior thigh touches the table, and the knee flexes to approximately 80°, indicating the typical length of the hip flexors.

Additional notes

Healthcare professional information

Name:

License number:

Signature:

References

Kendall, F., et al. (2005) Muscle testing and function with posture and pain. 5th Edition, Lippincott Williams & Wilkins Publisher, Philadelphia.

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