Standard Diagnostic Tests

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Arthroscopy: An arthroscope is a small tube that is inserted into the body. It contains a system of lenses, a small video camera, and a light for viewing. The camera is connected to a monitoring system that lets a surgeon view the surgery while it is being done. The arthroscope is often used with other tools that are inserted through another cut or incision. These tools are used for grasping, cutting, and probing.

Arthrogram: Arthrography is a type of imaging test used to look at a joint, such as the shoulder, knee, or hip. It may be done if standard X-rays don't show the needed details of the joint structure and function.

Bone Scan: A bone scan is a specialized radiology procedure used to examine the various bones of the skeleton. It is done to identify areas of physical and chemical changes in bone. A bone scan may also be used to follow the progress of treatment of certain conditions.

Computed Tomography (CT Scan): Computed tomography/ CT scan is a diagnostic imaging procedure that uses a combination of X-rays and computer technology to produce images of the inside of the body. It shows detailed images of any part of the body, including the bones, muscles, fat, organs and blood vessels.

Discography: A discogram, also called discography, is an imaging test used to look for the cause of back pain. A discogram might help the healthcare professional determine if a specific disk in the spine is causing back pain. During a discogram, dye is injected into the soft center of one or more disks. The injection sometimes reproduces the back pain.The dye also moves into any cracks in the disk's exterior, which can then be seen on an X-ray or CT scan.

Doppler Ultrasound: Doppler ultrasound is a noninvasive test that can be used to measure the blood flow through your blood vessels. It works by bouncing high-frequency sound waves off red blood cells that are circulating in the bloodstream. A regular ultrasound uses sound waves to produce images, but can't show blood flow.

Echocardiography: An echocardiogram is a noninvasive (the skin is not pierced) procedure used to assess the heart's function and structures. During the procedure, a transducer (like a microphone) sends out sound waves at a frequency too high to be heard. When the transducer is placed on the chest at certain locations and angles, the sound waves move through the skin and other body tissues to the heart tissues, where the waves bounce or "echo" off of the heart structures. These sound waves are sent to a computer that can create moving images of the heart walls and valves.

Electrocardiogram (ECG or EKG): An electrocardiogram (ECG or EKG) is one of the simplest and fastest tests used to evaluate the heart. Electrodes (small, plastic patches that stick to the skin) are placed at certain spots on the chest, arms, and legs. The electrodes are connected to an ECG machine by lead wires. The electrical activity of the heart is then measured, interpreted, and printed out. No electricity is sent into the body.

Electromyography: Electromyography (EMG) measures muscle response or electrical activity in response to a nerve’s stimulation of the muscle. The test is used to help detect neuromuscular abnormalities. During the test, one or more small needles (also called electrodes) are inserted through the skin into the muscle. The electrical activity picked up by the electrodes is then displayed on an oscilloscope (a monitor that displays electrical activity in the form of waves). An audio-amplifier is used so the activity can be heard. EMG measures the electrical activity of the muscle during rest, slight contraction and forceful contraction. Muscle tissue does not normally produce electrical signals during rest. When an electrode is inserted, a brief period of activity can be seen on the oscilloscope, but after that, no signal should be present.

Contrast Enhanced CT Scan: CT scans may be done with contrast. Contrast refers to a substance taken by mouth or injected into an IV line that causes the particular organ or tissue under study to be seen more clearly.

Magnetic Resonance Imaging (MRI): Magnetic resonance imaging, or MRI, is a noninvasive medical imaging test that produces detailed images of almost every internal structure in the human body, including the organs, bones, muscles and blood vessels. MRI scanners create images of the body using a large magnet and radio waves. No ionizing radiation is produced during an MRI exam, unlike X-rays. These images give your physician important information in diagnosing your medical condition and planning a course of treatment.

Nerve Conduction Study (NCS): A nerve conduction velocity (NCV) test measures how fast an electrical impulse moves through your nerve. NCV can identify nerve damage. This test is also called a nerve conduction study. During the test, your nerve is stimulated, often with electrode patches put on your skin. Two electrodes are placed on the skin over your nerve or over a muscle. One electrode stimulates your nerve with a very mild electrical impulse. The other electrode records it. The resulting electrical activity is recorded by another electrode. This is repeated for each nerve being tested.

Quantitative Computed Tomography: Quantitative computed tomography (QCT) is a test to measure bone mineral density (BMD). It is performed using a computed tomography (CT) scanner and results in a 3D image. Hip and lumbar spine are the most common choices for evaluation with QCT.

Radiographs (X-rays): X-rays use invisible electromagnetic energy beams to produce images of internal tissues, bones, and organs on film or digital media. Standard X-rays are performed for many reasons, including diagnosing tumors or bone injuries.

Stress Tests: A stress test shows how the heart works during physical activity. It also may be called a stress exercise test. Exercise makes the heart pump harder and faster. A stress test can show problems with blood flow within the heart.

Venography: A venogram is a test that lets your healthcare provider see the veins in your body, especially in your legs. A special dye is injected that can be seen on an X-ray. The dye lets your healthcare provider see your veins and how healthy they are.

Neurological and Orthopedic Office Tests

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Adson's Test: Adson's test is a provocative test for Thoracic Outlet Syndrome accompanied by compression of the subclavian artery by a cervical rib or tightened anterior and middle scalene muscles. he arm of the standing (or seated) patient is abducted 30 degrees at the shoulder and maximally extended.The radial pulse is palpated and the examiner grasps the patient's wrist. The patient then extends the neck and turns the head toward the symptomatic shoulder and is asked to take a deep breath and hold it. The quality of the radial pulse is evaluated in comparison to the pulse taken while the arm is resting at the patient's side. Some clinicians have patients turn their head away from the side tested in a modified test.

Anterior Drawer: The patient lies supine on a plinth with their hips and knees flexed. The examiner sits on the toes of the tested extremity to help stabilise it. The examiner grasps the proximal lower leg, just below the tibial plateau or tibiofemoral joint line and attempts to translate the lower leg anteriorly. The test is considered positive if there is a lack of end feel or excessive anterior translation relative to the contralateral side.

Apley Test: The Apley's grind test is used to evaluate individuals for problems of the meniscus in the knee. The patients knee is to be flexed, then the examiner laterally and medially rotates the tibia. The test is performed in conjunction with the Apley's distraction test. If the rotation plus compression is more painful or shows decreased rotation relative to the normal side, the lesion is most likely to be a meniscus injury.

Axial Compression: The test is used during a musculoskeletal assessment of the cervical spine when looking for cervical nerve root compression causing Cervical Radiculopathy. The version that provoked arm symptoms the best was with the neck in extension, lateral flexion and axial compression.

Babinski's Test: The Babinski reflex occurs after the sole of the foot has been firmly stroked. The big toe then moves upward or toward the top surface of the foot. The other toes fan out. Babinski reflex is one of the normal reflexes in infants and in children up to 2 years old. In adults, this reflex is not normal and often indicates a problem with the brain or spinal cord.

Impingement Test: The examiner places the patient's arm shoulder in 90 degrees of shoulder flexion with the elbow flexed to 90 degrees and then internally rotates the arm. The test is considered to be positive if the patient experiences pain with internal rotation.

Lachman Test: The Lachman test is a passive accessory movement test of the knee performed to identify the integrity of the anterior cruciate ligament (ACL). The test is designed to assess single and sagittal plane instability.

Lasegue's Test (a.k.a. Bragard's Test): Bragard's Test is used to evaluate whether lumbar and/or ischiadic pain originates from lumbosacral radiculopathy. The patient is in supine position when the examiner lifts the straight leg passively into hip flexion until the familiar pain occurs. Subsequent, the leg is lowered just below the pain threshold and the foot is pulled in dorsiflexion. If the familiar pain occurs again, the Bragard's sign is positive indicating a nervous involvement in the patient's pain's origin.

McMurray's Test: McMurray's test is used to determine the presence of a meniscal tear within the knee. The patient is positioned supine lying with knee completely flexed. One hand holds the sole of the foot acting as a support, and the other holds the knee and palpatess the joint line.

Phalen's Sign: The test is for carpal tunnel syndrome. The patient places his/her flexed elbows on a table, allowing the wrists to fall into maximum flexion. The patient is asked to push the dorsal surface of their hands together and hold this position for 30-60 seconds. This position will increase the pressure in the carpal tunnel, in effect compressing the median nerve between the transverse carpal ligament and the anterior border of the distal end of the radius.

Quadriceps Inhibition Test: The purpose of this test is to detect the presence of patellofemoral joint disorder. Patient is positioned in supine or long sitting with the involved knee extended. The examiner places the web space of his hand just superior to the patella while applying pressure. The patient is instructed to gently and gradually contract the quadriceps muscle.

Slocum Test: Testing for anterior rotatory instability of the knee. The patient is lying supine with the knee flexed 90 degrees and the foot fixed to the examining table by the examiner. 30 degrees of internal rotation is applied to the tibia by rotating the foot. The examiner pulls anteriorly on the tibia to assess for anterolateral rotary instability. Results are compared bilaterally.

Supraspinatus Isolation: This test is used to assess for lesions of the rotator cuff, specifically the supraspinatus muscle and supraspinatus tendon. Testing the arm with the thumb in 'thumbs up' is most suitable for maximal contraction of the supraspinatus muscle. Resistance is provided by the examiner, as they are assessing for weakness or pain. Weakness or pain would represent a positive test, which would indicate a tear of the supraspinatus muscle or tendon, or a neuropathy of the suprascapular nerve

Tinel's Sign: The examiner taps firmly with the fingertip over the course of the nerve. The point at which symptoms are provoked indicates nerve compression or regeneration depending on the clinical scenario. Recreation of the "pins and needles" feeling is considered a positive Tinel sign.

Waddell Test: Waddell's sign should be done as a part of physical examination in lumbar back pain as it offers only an alert that the patient may need a psychological examination. The signs generally test for superficial and non-anatomic tenderness, axial loading and acetabular rotation simulation, distraction, regional sensory disturbance and weakness, and overreaction.