Lower Limb S.O.A.P. assessment help sheet

S – Subjective

Information the patient tells you.

- **Presenting complaint**: Onset, mechanism, location, character, severity, timing, aggravating/easing factors, associated symptoms
- **Functional impact**: Walking, stairs, work/sport limitations
- **Past medical history**: Previous injuries, surgeries, systemic conditions
- **Medications**: Analgesics, anti-inflammatories, anticoagulants
- **Social history**: Occupation, footwear, activity level
- **Goals / expectations**: Desired outcomes (e.g., pain relief, return to sport)

O – Objective

What you observe, measure, or test.

- **Observation:** Gait**,** posture, swelling, deformity, muscle wasting
- **Palpation**: Tenderness, temperature, swelling, tone
- **Range of Motion**: Hip, knee, ankle, toes – active and passive
- **Strength Testing**: Manual muscle testing (0–5 scale)
- **Special Tests**: See below
- **Functional Tests**: Balance, squat, hop tests

Special Tests (Lower Limb)

Test	Acronym	Purpose / Assessment	Brief Explanation
FABER	Flexion, Abduction, External Rotation	Hip / SI joint pathology	Leg in figure-4; pain = hip or SI issue
FADIR	Flexion, Adduction, Internal Rotation	Femoro-acetabular impingement	Flex, adduct, internally rotate; pain = impingement
Thomas Test	-	Hip flexor tightness	Opposite leg lifts off table = tight hip flexors
Lachman	-	ACL integrity	Pull tibia forward at 20–30° flexion; laxity = ACL injury
Valgus / Varus Stress	-	MCL / LCL integrity	Apply inward / outward force; pain / laxity = ligament injury
Anterior Drawer (Ankle)	-	ATFL integrity	Pull talus forward; laxity = ATFL injury
Talar Tilt	-	CFL integrity	Invert foot; excessive tilt = CFL injury
Thompson	-	Achilles tendon rupture	Squeeze calf; absent plantarflexion = rupture

FABER – Flexion, Abduction, External Rotation
FADIR – Flexion, Adduction, Internal Rotation
ACL – Anterior Cruciate Ligament
PCL – Posterior Cruciate Ligament
MCL – Medial Collateral Ligament
LCL – Lateral Collateral Ligament
ATFL – Anterior Talofibular Ligament
CFL – Calcaneofibular Ligament

A – Assessment

- Summarise findings, likely diagnosis, severity, stage (acute/chronic), contributing factors, and functional limitations.

- Example: Findings suggest right ankle inversion sprain (Grade II) with reduced dorsiflexion affecting gait.

P – Plan

- **Immediate management:** RICE, pain control, taping / bracing
- **Rehabilitation**: ROM, strengthening, balance / proprioception, gradual return to sport
- **Education**: Injury explanation, activity modification, footwear advice
- **Referrals**: Imaging or specialist as needed
- **Review**: Reassess and adjust goals