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## Cervical rotation flexion test

Purpose: To assess the contribution of 1st rib hypomobility to brachial plexus pain. Test Position: Sitting. Performing the Test: Rotate the head away from the painful side to end range. While maintaining end range rotation, attempt to laterally flex as far as possible on the tested side. If unable to laterally flex the head, the test is considered positive. Diagnostic Accuracy: Unknown. Importance of the Test: As you turn your head away from the affected side, you will be unable to laterally flex your head to the affected side if you have an elevated/hypomobile first rib. This is due to the first rib blocking the transverse process of C7. It is an important test to see the contributions of first rib hypomobility to pain associated with the neck and upper extremity, such as some cases of Thoracic Outlet Syndrome. Think about using rib mobilizations and stretching/using muscle energy techniques on the muscles that attach to the first rib. ("Cervical spine rotation and lateral flexion combined motion in the examination of the thoracic outlet"). Note: tests should only be performed by a properly trained health care practitioner. Hall, T., Briffa, K., Hopper, D., & Robinson, K. (2010). Long-term stability and minimal detectable change of the cervical flexion-rotation test. *Journal of orthopaedic & sports physical therapy*, 40(4), 225-229. Ogince, M., Hall, T., Robinson, K., & Blackmore, A. M. (2007). The diagnostic validity of the cervical flexion-rotation test in C1/2-related cervicogenic headache. *Manual therapy*, 12(3), 256-262.