Supplementary File 1: Differential diagnosis justification for physical examination screening

Testing details for other pain-generating structures, with reproduction of reported symptoms considered a positive test

- 1. Sciatic nerve entrapment: Active piriformis test, Seated piriformis stretch test.(1)
- 2. Ischiofemoral impingement: Ischiofemoral impingement long-stride walking tests.(2)
- 3. Hip joint: the Anterior Impingement Test and the Flexion-Abduction-External Rotation Test.(3)
- 4. Adductor magnus tendinopathy: Prone adductor squeeze with active hip extension.
- 5. Lumbar spine: Palpation performed with the patient prone, with the examiner applying pressure centrally over the lumbar spinous processes and unilaterally over the lumbar zygapophyseal joints and/or transverse processes (4).

A full neurological examination if indicated from the screening questionnaire (Vroomen et al 2000).

References

- 1. Martin HD, Kivlan BR, Palmer IJ, et al. Diagnostic accuracy of clinical tests for sciatic nerve entrapment in the gluteal region. *Knee Surg Sports Traumatol Arthrosc.* 2014;22:882-8.
- 2. Gómez-Hoyos J, Martin RL, Schröder R, et al. Accuracy of 2 Clinical Tests for Ischiofemoral Impingement in Patients With Posterior Hip Pain and Endoscopically Confirmed Diagnosis. *Arthroscopy*. 2016;32:1279-84.
- 3. Tijssen M, van Cingel REH, de Visser E, et al. Hip joint pathology: relationship between patient history, physical tests, and arthroscopy findings in clinical practice. *Scand J Med Sci Sports*. 2017;27:342-50.
- 4. Maitland GD. Vertebral Manipulation. Kent: Elsevier Science; 2014.