Diagnostic Algorithm for SI Joint Pain

Chief Complaints:

- Low back pain (below L5)
- Pelvis/buttock pain
- Hip/groin/thigh pain
- Lower extremity pain usually above the knee (possible numbness, tingling, weakness)
- Sitting problems
- Pain with position changes or transitional motions (i.e., sit to stand, supine to sit)
- Poor sleep habits
- Unilateral leg giving way or buckling

History:

• New onset or chronic low back pain +/- trauma

Spine

Exam

Hip

Exam

- Previous lumbar surgery
- Post-partum pain
- Description of pain
- Onset and duration of symptoms
- What makes it better/worse
- General symptoms (fever, chill, weight loss)
- Treatment to-date: PT, meds, spine injections, chiropractic, other

SI Joint Exam: Point to pain while standing (Fortin finger test) / Tenderness over SIJ sulcus / Posterior SIJ tender to palpation / Patient not sitting on affected side. Single leg stance test may induce pain on supporting side.

SIJ Provocative Tests¹



If pain inferior to L5, negative neurological exam, and minimum of 3 positive provocative tests (see NOTE), the SIJ is likely a pain generator and image-guided, diagnostic SIJ injection(s) should be ordered. **NOTE:** At least 1 of 3 positive tests must be **Thigh Thrust** or **Compression**.



The iFuse Implant System is intended for sacroiliac joint fusion for conditions including sacroiliac joint disruption and degenrative sacroiliitis.

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