

CLINICAL SKILLS FOR EMERGENCY MEDICINE: KNEE EXAMINATION

1. Inspection I	<p>Observe the patient walking (<i>any deformities – varus or valgus?</i>):</p> <p>Enquire about ongoing pain prior to palpation!</p>
2. Inspection II: LOOK	<p>Skin (colour, sinuses, scars) Shape: patellar swelling: quadriceps wasting Position: held “awkwardly”?</p>
3. Inspection III: FEEL	<p>Skin (compare sides to check warmth) Patellar tap: <i>what does it signify if +ve?</i> Systematic palpation of soft tissues and bony outlines: <i>where are the “joint lines”?</i> Do not forget to palpate popliteal fossa!</p>
4. Movements I: MOVE	<p>Flexion & extension: <i>Feel for crepitus during the movement range.</i></p> <p>Rotation: 1 Fully flex the knee 2 Left hand to stabilise the joint 3 Right hand rotates leg int + ext 4 Repeat at different angles of flexion 5 Positive = catching or clicking</p> <p>Patellar apprehension: <i>Press patella laterally as flexion begins using the thumb. What is a +ve test? Why?</i></p>
5. Movements II: LIGAMENTS	<p>Medial and lateral ligaments: <i>At full extension + 30 deg flexion. Remember to compare sides!</i></p> <p>Cruciates: <i>“Sag sign” for PCL problems;</i></p> <p>ACL first test: 1 Anchor flexed knee with foot 2 Grasp upper end of tibia firmly 3 Rock back + forth checking for “give”</p> <p>ACL Lachman test: 1 Flex knee to 20 deg 2 Grasp lower thigh and upper leg 3 Shift joint surfaces back and forth 4 Positive = gliding sensation</p>
6. Movements III: MENISCI	<p>Apley’s test: 1 Pronate the patient 2 Flex knee to 90 deg 3 Rotate while applying a compressive force 4 Repeat while pulling leg upwards 5 Positive = increased pain at step 4</p>