| Antonion Knoo Doin (No | Referral Guide: | Outle o | | | | |
|--|--|----------------------|--|--|--|--|
| Anterior Knee Pain (No Acute Injury) | Page 1 of 1 | Ortho | | | | |
| Diagnosis/Definition: | | | | | | |
| Localized to anterior part of the knee usually a gradual non-traumatic onset aggravated by increased activity, running, squatting, stair climbing or prolonged sitting symptoms normally decrease with rest. | | | | | | |
| Initial Diagnosis and Management: | | | | | | |
| H&P, NSAIDs, avoid aggravating activities, PT for instruction on strengthening exercises and use of ice after activities. | | | | | | |
| Ongoing Management and Objectives: | | | | | | |
| Resolution on decreasing symptoms in 6-8 weeks. | | | | | | |
| If no improvement try; alternate NSAID, neoprene sleeve with patella opening or consider x-ray with sunrise view. | | | | | | |
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| Indications for Specialty Care Re | ferral: | | | | | |
| No relief with initial management for 8 weeks history of mechanical symptoms (catching/locking). Question of underlying instability. Prolonged effusion greater than two weeks. | | | | | | |
| Test(s) to Prepare for Consult: | repare for Consult: Test(s) Consultant May Need To Do: | | | | | |
| Await MRI (ortho will order if neede | d). MRI joint aspirat | on (fluid analysis). | | | | |
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| Criteria for Return to Primary Care: | | | | | | |
| Resolution of symptoms. | | | | | | |
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| Revision History: Created Revised | | | | | | |

Disclaimer: Adherence to these guidelines will not ensure successful treatment in every situation. Further, these guidelines should not be considered inclusive of all accepted methods of care or exclusive of other methods of care reasonably directed to obtaining the same results. The ultimate judgment regarding the appropriateness of any specific procedure, therapy, or referral must be made by the physician/provider in light of all circumstances presented by an individual patient.