

Symptom chart for acute knee pain

START HERE

Did the knee pain begin suddenly, with an injury, slip, fall, or collision?

YES

Does the knee joint appear deformed, or out of position?

YES

You may have a fracture or dislocated patella.

Stop what you are doing immediately and go to a hospital emergency room or an orthopedic surgeon specializing in knee problems.

If possible, splint the leg to limit the movement of the knee until you reach the doctor. Do not put any weight on the knee. Use a wheelchair, a cane, or crutch to prevent putting any weight on the leg, which might cause further damage to the joint.

NO

GO TO

FLOW CHART #2

ON CHRONIC KNEE PROBLEMS THAT DEVELOP OR WORSEN OVER TIME.

NO

Did you hear a "pop" and does your knee feel unstable or wobbly?

YES

Go to an orthopedic surgeon immediately, you may have torn your anterior cruciate, or other ligaments in the knee.

Stop what you are doing. Continuing activity despite the feeling that the knee is unstable can cause additional damage to other ligaments, meniscus, and cartilage. Try ice on the knee to control swelling. Take anti-inflammatories like Advil or Nuprin until your doctor's appointment. About a third of ligament tears get better with exercises, a third may need a brace, and a third may need surgery.

NO

Does your knee hurt as you bend it?

YES

You may have damaged the articular cartilage on the bottom of the femur, top of the tibia, or inside the kneecap. There may be a small bone chip causing inflammation.

Try anti-inflammatories, as directed on the bottle, for two days to reduce the chronic inflammation.

Restrict activity which causes pain. Call a specialist for a more in-depth diagnosis and treatment.

NO

Does it hurt when walking or when you put weight on your knee?

YES

You may have damaged a meniscus. If pain does not go away, this injury may require surgery.

Try anti-inflammatories, as directed on the bottle, for two days to reduce the chronic inflammation.

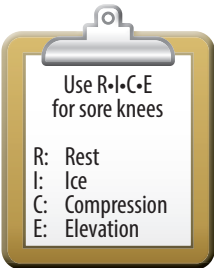
Call a knee specialist. A serious meniscus tear can require surgery.

NO

Other types of knee pain or discomfort that develop over a short period of time may mean that you have tendinitis or a ligament strain. In fact, sprains are sometimes mistaken for a broken bone. The signs of a sprain include joint pain which increases with movement; tenderness to the touch; and rapid swelling. These may be followed by a black and blue discoloration. Sprains in the knee involve partial tears to the ACL, PCL, MCL, and LCL. Rapid acceleration or deceleration causes strains. A strain is characterized by a sharp pain or "stitch." The area becomes sore and stiff within a few hours or moments of straining. Pain accompanies further movement but often improves within days.

Try anti-inflammatories to reduce the chronic inflammation. Also, use ice to reduce swelling.

The good news is that many knee injuries are simply strains from overuse. The three knee tendons at risk for pain are the patellar tendon, the quadriceps tendon, and the popliteus. Dancers, cyclists, and runners frequently experience bouts of tendinitis, when heavy usage stretches out their tendons. This can include patellar tendinitis or patellofemoral pain syndrome. Neither requires surgery. When you return to activity, keep in mind that in sports like tennis, strains are often caused by poor footwork. Consider a tennis lesson with a pro who can improve your preparation and anticipation so there is less need for lunging and uncoordinated stops and starts.



Remember, those who choose to self-diagnose themselves, assume responsibility for their actions. Always consult with a specialist to assess the cause of your symptoms.