

## **Knee Examination \_ Special Tests**

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- I. Introduction –
  - a. Goals of examination:
    - i. Establish differential diagnosis
    - ii. Identify all involved structures
    - iii. Identify all lesions
    - iv. Identify factors contributing with disorder
    - v. Establish prognosis & treatment plan

***Key to Successful Treatment is Recognition of Problem***
  - b. Specific Examination Process
    - i. Orderly process
    - ii. Pain – mechanical
    - iii. Anatomy & biomechanics determine pathology
    - iv. Identify functional limitations

***Function Instability -----Functional Disability***
  - c. ***Elements of Exam***
    - i. Subjective history
    - ii. Inspection & observation
    - iii. Palpation
    - iv. ROM
    - v. MMT
    - vi. Special tests
    - vii. NV assessment
    - viii. Instrumented testing
    - ix. Knee scoring assessment
- II. Components of Exam:
  - a. Subjective history
    - i. Chief complaint
    - ii. Mechanism of injury
    - iii. Did you hear or feel anything?
    - iv. Swelling?

1. when
  2. how much
  3. early – late
  - v. Pain level
    1. location, severity, nature
  - vi. level of function
  - vii. previous injuries &/or surgery
- b. Inspection & Observation
- i. Watch gait pattern
  - ii. Standing alignment
  - iii. Joint effusion
  - iv. Muscular atrophy
  - v. Quadriceps control
  - vi. Thrusting gait
  - vii. Quad avoidance gait
  - viii. Scars/incisions, etc
  - ix. Level of mobility
    1. level surface, stairs, sit to stand, etc...
- c. Palpation
- i. Patellar mobility (M-L, S-I)
  - ii. Temperature
  - iii. Effusion & swelling
  - iv. Joint line
    1. femoral side
    2. meniscus
    3. tibial side
  - v. Collateral ligaments
    1. MCL (proximal to distal)
    2. LCL (entire structure)
  - vi. Boney structures:
  - vii. soft tissue palpation
- d. Objective Examination
- i. ROM (PROM& AROM)
  - ii. Accessory motion
  - iii. Flexibility assessment
  - iv. Manual Muscle Testing

v. Special Tests

1. assessment of ligamentous stability
2. side to side assessment
3. assess translation & end feel
4. relaxed patient & clinician
5. know what your assessing

6. ligamentous assessment:

a. PCL first

- i. Step off test  
*Clancy: JBJS '82*
- ii. Gravity test
- iii. Active quad test  
*Daniel et al: JBJS'88*
- iv. Posterior drawer test

b. ACL tests

- i. Lachman's test (ACL)
- ii. Anterior drawer at 90 degrees (ACL)  
*Noyes et al: Clin Orthop '80*
- iii. Anterior drawer with rotation
- iv. Pivot shift
- v. Jerk test  
*Hughston: JBJS '80*

c. Collateral ligaments

- i. Valgus stress at 0 deg. (TCL, PMS)
- ii. Valgus stress at 30 deg. (TCL)

- iii. Varus stress at 0 deg (FCL, PLS)
- iv. Varus stress at 30 deg (FCL)

d. Posterolateral Instability

- i. External rotation at 30 deg
- ii. External rotation at 90 deg
- iii. Extension recurvatum test  
*Jakob et al: Acta Orthop Scand '81*

7. Meniscus Testing

- a. McMurray's
- b. Apley compression test
- c. Spring test
- d. Compression test
- e. Palpation

8. Neurovascular Testing

a. Neurologic assessment

i. Motor

- Quads (L2,3,4)
- Semimembraneous (S1,L5)
- Biceps Femoris (S1)
- PF
- DF

ii. DTRs

iii. Sensation:

- L3 – anterior thigh below knee
- L4 – crosses anterior knee, medial knee & calf
- L5 – lateral calf & knee
- S2 – midline posterior thigh

iv. Vascular assessment:

- Dorsalis pedis
- Capillary refill – big toe

9. Instrumented Knee testing:

a. Stability assessment – KT testing

i. KT 1000 or KT 2000

ii. Side to side comparison

iii. Anterior & posterior translation

***Daniel et al: AJSM '85***

b. Muscular Performance

i. Biodex testing

ii. 180 & 300 o/sec

iii. Side to side assessment

iv. Torque to BW assessment

v. Unilateral ratios

vi. Fatigue

vii. Work values

viii. Acceleration

***Wilk KE (Phys Ther of the Knee 2<sup>nd</sup> Ed) Mangine (Ed)***

***Davies GJ : Compendium of Isokinetics***

***Wilk, Soscia, Romeniello: JOSPT '94***

- c. Functional Assessment
  - i. Hop testing
    - Side to side comparison
    - Single leg hop test
    - Distance
    - Timed
    - Cross over hop

***Noyes, Barber, Mangine: AJSM '91***  
***Barber, Noyes, Mangine: Clin Orthop '90***

- d. Proprioception Testing
  - i. Biodex stability system
  - ii. Passive active joint reposition sense
- e. Knee Rating System:
  - i. Cincinnati (Noyes)
  - ii. Lysholm
  - iii. International Knee Documentation Committee (IKDC)
  - iv. KOS
  - v. Pittsburgh (Irrgang)

### III. Summary

- a. Key points:
  - i. Numerous keys to clinical exam
  - ii. Subjective a key component
  - iii. Knowledge of anatomy & biomechanics
  - iv. Think kinetic chain effect
  - v. Soft tissue integrity & quality
  - vi. Know what your assessing
  - vii. Relaxed patient ----relaxed clinician
  - viii. Pull it all together