





DIAGNOSTIC CLASSIFICATION CRITERIA

For Meniscal Lesions

HISTORY



- Twisting injury
- Tearing sensation at time of injury
- Delayed effusion (6-24 hours post injury)
- History of "catching" or "locking"

EXAMINATION



- Pain with forced hyperextension
- Pain with maximum passive knee flexion
- Pain or audible click with McMurray's maneuver
- Joint-line tenderness
- Discomfort or a sense of locking or catching in the knee over either the medial or lateral joint line during Thessaly test (20 degree knee

MENISCAL PATHOLOGY COMPOSITE SCORE

Meniscal Pathology Composite Score (MPCS): the combination of history of "catching" or "locking," pain with forced hyper- extension, pain with maximum passive knee flexion, joint- line tenderness, and pain or audible click with McMurray's maneuver



MPCS	Inositive	>1 positive finding		>5 positive findings
Sensitivity	23.4%	76.6%	30.8%	11.2%
Specificity	56.9%	43.1%	90.2%	99.0%

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- Prevalence of 12%-14%
- A high incidence of meniscal tears occurs with injury to the Anterior Cruciate Ligament
- Tear patterns of the knee meniscus can be classified as either traumatic tears or degenerative tears.