**GP KNEE REFERRAL FLOW CHART**

Acute sudden onset traumatic knee pain

Anterior knee pain or other knee pain

Acute on chronic knee pain. History of mild to moderate injury. History of previous knee pain.

History suggest traumatic ligament or meniscal injury less than 3 weeks, locked knee or significant swelling

Consider referral to A+E or urgent XR

6-12/52 primary care led conservative treatment including advice and education, Get U Better app, OTC medication, consider physio referral

Acute clinic criteria not met

RED FLAGS

Sudden Increase in severe pain with reduced function or swelling.

* Infection
* Insufficiency fracture
* Malignancy
* Locked knee
* Inability to weight bear
* Significant trauma

If present refer to A+E or acute knee clinic (see criteria on remedy) for assessment and management

Consider Acute knee clinic or MSKI advice email

See below for criteria;

<https://remedy.bnssgccg.nhs.uk/adults/orthopaedics/acute-knee-shoulder-clinics/>

Mild OA or no OA or CBA not met

MSKI referral

Physiotherapy referral

Moderate-severe OA and CBA met

XR

Possible OA

Signs of instability under load

Diagnosis unclear

Not improved

Atraumatic gradual onset knee pain

Suspicious of fracture