

# History & Examination of the Extremities – 2 Hours

## Part 2 (Knee)

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Back To Chiropractic CE Seminars

### **Course Objectives – Part 2 (Knee):**

The course will instruct the chiropractor to perform a thorough consultation and examination of the knee to properly diagnose common knee conditions. The course will focus on the logical thought process of history taking, physical examination procedures and accurate documentation. The chiropractor will gain an understanding of how to ask pertinent questions to determine a diagnosis as well as performing a detailed knee examination. The chiropractor will also gain improved knowledge of recognizing when and where to refer the patient or to commence chiropractic treatment. A discussion of the doctor-patient relationship and informed consent will also be covered.

### **Hour 1:**

Discussion involving the establishment of the doctor-patient relationship and the legal significance of obtaining informed consent will be covered. Examination procedures that include inspection, palpation, range of motion, muscle tests, neurologic examination, stability tests and special tests of the knee will be taught.

### **Hour 2:**

Instruction to formulate differential diagnoses of the knee will be presented as well as thorough discussion of the appropriateness for medical and imaging referral versus chiropractic treatment. A concise method of proper documentation will be explained as well as to have an accurate diagnosis to establish a treatment plan.

### **Course Outline - Part 2 (Knee):**

- I. Doctor-Patient relationship
  - a. Greeting, establish relaxed atmosphere
  - b. Explain what is going to take place during the initial office visit
  - c. Informed consent
    - i. §319.1. Informed Consent rules for California
- II. Patient mind-set
  - a. Having pain, scared, nervous, agitated, meeting expectations
  - b. Demanding, self-diagnosing, just wants treatment
  - c. Quiet, unsure of how to describe symptoms/onset
  - d. Syphon thru too much information/medical history
  - e. Direct patient to stay on topic
- III. Consultation
  - a. S.O.C.R.A.T.E.S.
  - b. Previous knee injuries / conditions / surgeries
  - c. Mechanism of injury
- IV. Anatomy of the Knee
  - a. Structures of the Knee
  - b. Function of the Knee
- V. Examination of the Knee
  - a. Inspection
  - b. Palpation
  - c. Range of motion
  - d. Muscle tests
  - e. Neurologic examination
  - f. Stability tests
  - g. Special tests

- VI. Conclusions from history and exam
  - a. Formulating a diagnosis/differential diagnosis based on the history and examination
  
- VII. Referral
  - a. X-ray
  - b. MRI
  - c. Orthopedic
  - d. Chiropractic
  
- VIII. Documentation
  - a. Recording concise information
  - b. Documenting Informed Consent
  - c. Recording rationale for diagnosis
  - d. Diagnosis to treatment plan
  - e. Case example