Knee Special Tests: Meniscus Testing

Meniscus testing involves a series of diagnostic maneuvers to assess the integrity and potential injuries of the meniscus, which are crucial cartilaginous structures in the knee joint. Apley's Compression Test is performed by applying downward pressure and rotating the foot to assess for meniscal pain or clicking. The Bounce Home Test evaluates for meniscal tears by assessing the ability to fully extend the knee after flexion. The McMurray Test involves manipulating the knee joint by rotating and extending it to detect meniscal tears based on the presence of pain, clicking, or locking. Lastly, the Thessaly Test assesses the stability of the meniscus through twisting motions while standing on one leg. These meniscus testing techniques enable healthcare professionals to diagnose meniscal injuries accurately, contributing to the development of appropriate treatment plans and facilitating patients' recovery and knee joint function.



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Meniscus Testing

Apley's Compression Test

Apple Compression-by-vice

The patient will be lying prone with the testing knee flexed to 90 degrees. The clinician will stabilize the patient's femur to the table, passively distract the tibia from the knee joint, and slowly rotate the tibia internally and externally. If this rotation and distraction is more painful or demonstrates increased rotation, the injury is most likely ligamentous. The clinician will then apply a compressive force to the knee and, again, slowly rotate the tibia internally and externally. If this rotation and compression is more painful or shows decreased rotation relative to the normal side, the deficit is most likely due to a meniscus injury.

Bounce Home Test

Bouncy-ball Home

The patient will be lying supine, and the clinician will hold the patient's heel of the testing foot with their hand and then passively flexes the knee. The knee is then passively allowed to extend; it should be able to fully extend, or "bounce home," with a sharp end feel. A positive test for a torn meniscus is indicated if full extension of the knee is incomplete or has a rubbery end feel.

McMurray Test

Mc-(Bill)-Murray

The patient will be lying supine with the testing knee in maximal flexion. The clinician will passively internally rotate and extend the knee to test the lateral meniscus. The clinician will passively externally rotate and extend the knee to test the medial meniscus. A positive indication is the reproduction of a "click" and pain in the knee joint.

Thessaly Test

Thistle-knee

The patient will be standing on one leg (uninvolved leg first) with approximately 5 degrees of knee flexion while the clinician provides their hands to assist with balance. The patient will rotate the femur on the tibia laterally and medially three times. This will be repeated with 20 degrees of flexion. A positive test is indicated if the patient experiences medial or lateral joint pain/discomfort or a sense of locking/catching in the knee.

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