



**Coventry and
Warwickshire**
Integrated Care Board

Arthroscopy of Knee Joint (Diagnostic and Therapeutic) Policy

Reference Number:	This will be applied to all new ICB-wide PPSs by the Governance and Corporate Affairs Team and will be retained throughout its life span.
Version:	Version 1.0
Name of responsible Committee and date approved or recommended to Integrated Care Board Board:	Audit Committee
Date approved by the Integrated Care Board (if applicable):	1 July 2022
Next Review Date:	1 April 2025
Expiry Date:	1 October 2025
Name of author and title:	Lucy Dyde
Name of reviewer and title:	Ali Cartwright
Department:	Corporate Office

VERSION HISTORY

Date	Version	Changes made to previous version	Consulting and Endorsing Stakeholders, Committees / Meetings / Forums etc.

Treatment	Arthroscopy of knee joint (diagnostic/therapeutic)
Indication	Internal joint derangement
Treatment:	<p>Diagnostic arthroscopy of the knee: Not commissioned or funded for the investigation of knee pain</p> <p>Therapeutic arthroscopy of the knee: Arthroscopy of the knee can be undertaken where a competent history and clinical examination has demonstrated clear evidence of an internal joint derangement (meniscal tear, ligament rupture or loose body) AND where conservative treatment has failed OR where it is clear that conservative treatment will not be effective. Occasionally MRI would be required but this would normally be requested by secondary care.</p> <p>Knee arthroscopy can therefore be carried out for:</p> <ul style="list-style-type: none"> • Removal of loose body. • Meniscal surgery (repair or resection). • Ligament reconstruction/repair (including lateral relapse). • Synovectomy. • Treatment of articular defects e.g. micro-fracture. • Treatment of osteoarthritis (only in line with NICE guideline (CG177)).¹ <p>A proportion of knee arthroscopies may not lead to the anticipated therapeutic intervention, and therefore will be coded as diagnostic arthroscopies. Surgeons are asked to ensure that coding of the arthroscopy is undertaken after the procedure has taken place.</p> <p>Knee arthroscopy for osteoarthritis: Arthroscopic knee washout (lavage and debridement) should NOT be used as a treatment for osteoarthritis because it is clinically ineffective.</p> <p>Referral for arthroscopic lavage and debridement should NOT be offered as part of treatment for osteoarthritis, unless the person has knee osteoarthritis with a clear history of mechanical locking.</p> <p>More effective treatment includes exercise programmes (e.g. ESCAPE pain), losing weight (if necessary) and managing pain. Osteoarthritis is relatively common in older age groups. Where symptoms do not resolve after non-operative treatment, referral for consideration of knee replacement or joint preserving surgery such as osteotomy is appropriate.</p> <p><u>Ref:</u> ¹ National Institute for Health and Clinical Excellence (NICE) (2014) Osteoarthritis: National clinical guideline for care and management in adults. [Available online from: https://www.nice.org.uk/guidance/cg177]</p>
Diagnostic and Procedure Codes	W871, W878, W879, EBI: W821, W822, W823, W828, W829, W851, W852, W853, W858, W859, W861, W831, W832, W833, W834, W835, W836, W837, W838, W839, W841, W842, W843, W844656

Equality Impact	https://www.england.nhs.uk/publication/evidence-based-interventions-policy-equality-and-health-inequalities-full-analysis-form/
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