

Patellar Dislocation Reduction – 30.145

INDICATION:

Isolated non-traumatic lateral patellar dislocation.

CONTRAINDICATIONS:

- A. Direct traumatic mechanism of injury (impact directly to the knee).
- B. Any sign of associated patella fracture (crepitus).
- C. Any associated injury to same extremity (femur fracture, tibia/fibula fracture, pelvic fracture).
- D. Any instability of the knee joint, suggesting major ligamentous injury (“true knee dislocation”) rather than patella dislocation.

PROCEDURE:

- A. Follow Pain Management protocol.
- B. Patient will usually present with the knee flexed and an obviously laterally displaced patella.
- C. Gently apply pressure to the lateral aspect of the patella (directing it medially) while extending the leg.

NOTES & PRECAUTIONS:

A. Reductions **should not** be attempted for medial dislocations, as these commonly have associated fractures.

B. Patients should be splinted and transported regardless of success of reduction attempt. If a patient does not want transport after successful reduction, **OLMC contact is mandatory as part of the refusal process.**

