

Knee Pain on Stairs: What to Notice Before Your Appointment

A simple two-page note to help you describe the pattern clearly - without trying to diagnose it yourself.

You do not need to arrive with an explanation. Bring what you have noticed. Those details can help your practitioner understand the pattern and decide what to assess next.

1 Start with what you noticed

Pain started around: _____

What sets it off?

- | | |
|---|---|
| ☐ Going downstairs | ☐ Going upstairs |
| ☐ Walking downhill | ☐ Squatting or kneeling |
| ☐ Getting out of a low chair / car | ☐ Sitting with the knee bent for a long time |

Something else: _____

Where do you feel it?

- | | |
|---|--|
| ☐ Front / around the kneecap | ☐ Behind the kneecap |
| ☐ Inside of the knee | ☐ Outside of the knee |
| ☐ Back of the knee | ☐ Hard to pinpoint |

2 Three things worth noticing

What sets it off? Only stairs, or do hills, squats, low chairs or other movements bring on the same pain?

How does it behave afterwards? Does it settle within a few minutes, stay sore for hours, or remain noticeable the rest of the day?

How is it changing? Is it easing, staying much the same, becoming more frequent, or taking less activity to provoke?

3 Think back: did anything change?

- | | |
|---|---|
| ☐ More walking than usual | ☐ More stairs or hills |
| ☐ Back to gym, running or sport | ☐ Longer days on your feet |
| ☐ Moving again after a quiet stretch | ☐ A previous knee irritation returning |

If none of these fits, do not force an explanation. A recent change may help explain the timing, but it does not diagnose the cause.

Use the pattern. You do not need to name it.

The aim is to notice what your knee is doing, make the aggravating task more manageable for now, and know when it is worth getting assessed.

What you can do for now

- ☐ If stairs clearly provoke the pain, reduce how many you do at one time where that is practical.
- ☐ Use the handrail, or a lift occasionally, if that makes the task easier.
- ☐ Avoid repeatedly using the stairs just to check whether the pain is still there.
- ☐ Keep moving in ways that feel reasonably comfortable, such as walking on level ground.
- ☐ Look at the pattern across several days rather than judging it from one painful step.

Simple rule: reduce the aggravating load for a while, but keep comfortable movement going. If the pattern is settling, gradually return towards your usual activity.

Questions to take into your appointment

- This is the pattern I have noticed. What does it suggest to you?
- What can I keep doing in the meantime?
- Should I be doing fewer stairs or hills for now?
- Would strengthening or a gradual exercise plan be appropriate for me?
- What would tell me to come back sooner?

When to arrange an assessment

Book an assessment if the pain persists or keeps returning, is getting worse, everyday activities are becoming harder, the knee repeatedly gives way, there is noticeable swelling or locking, there was a significant injury, the pain is affecting sleep or daily function, or you are unsure how much activity is appropriate.

SEEK MEDICAL ATTENTION SOONER IF

- there has been major trauma and you cannot bear weight on the leg
- the knee looks visibly deformed
- the joint is very swollen, hot or red together with fever or feeling acutely unwell

Take this with you: What you have noticed is an important part of the conversation. Your practitioner can use it with the rest of your assessment to decide what happens next.

General information only. This resource does not replace individual medical advice. If you are concerned about your knee, speak with your doctor, physiotherapist or another appropriately qualified clinician. In an emergency, call 000.