Schematic of pilot

**Arthroscopic lavage (with or without debridement as clinically indicated):**
- Day case procedure under general anaesthesia.
- (Depending on the surgeon’s standard practice) a tourniquet to be used on the upper thigh, with either formal exsanguination of the leg or elevation.
- After sterile preparation and draping, arthroscope to be inserted into the knee joint via a lateral parapatellar stab arthrotomy, and probe inserted via a medial parapatellar tendon stab arthrotomy. Drainage cannula to be inserted via a further lateral suprapatellar arthrotomy.
- Ordered inspection of the joint and the intraarticular structures follows.
- Joint to be lavaged with ≥3 litres warm saline and loose debris washed out. Further debridement to remove larger loose bodies and trim frayed meniscal edges, minor tears or osteophytes to be carried out at the surgeon’s discretion. Irrigation fluid to be drained from the knee and the arthroscope removed.
- Incisions to be sutured or closed with suture strips (as per clinical judgement), and dressed. Local anaesthesia to be inserted into the knee space at the end of surgery for post operative analgesia.

**Placebo surgery:**
- Informed by the extensive discussions with the surgeons and anaesthetists.
- Preparation and initial management as per the arthroscopic lavage group ie day case procedure under general anaesthesia and, depending on the surgeon’s standard practice, a tourniquet to be used on the upper thigh, with either formal exsanguination of the leg or elevation.
- After sterile preparation and draping, three 1cm skin incisions, penetrating only the epidermis, to be made in the same medial and lateral parapatellar tendon and lateral suprapatellar positions as for a standard arthroscopy. No penetration of the knee space.
- Incisions to be sutured or closed with suture strips (as per clinical judgement) and dressed. Local anaesthesia to be inserted into the incisions for post operative analgesia.
- Patients to be kept in theatre for a similar time to that required for lavage (approximately 20 minutes).

**Non-operative management with specialist reassessment:**
- Specialist reassessment to be undertaken and recommendation of care (other than arthroscopic lavage) made, taking into account previous management. Specific management regimen at discretion of enrolling surgeon (details to be recorded).

*specific form of surgery only revealed in theatre*