

If you require a special edition of this leaflet

This leaflet is available in large print. Arrangements can also be made on request for it to be explained in your preferred language. Please contact the Patient Advice and Liaison Service (PALS) email: pals.office@rjah.nhs.uk

Feedback

Tell us what you think of our patient information leaflet.

Please send your comments to the Patient Advice and Liaison Service (PALS) email: pals.office@rjah.nhs.uk

Date of publication: October 2016

Date of review: October 2018

Author: Andrew Barnett

© RJAH Trust 2016

Information for patients Knee Arthroscopy



Arthroscopy

The Robert Jones and Agnes Hunt
Orthopaedic Hospital NHS Foundation Trust,
Oswestry, Shropshire SY10 7AG
Tel: 01691 404000
www.rjah.nhs.uk

Knee Arthroscopy

This leaflet will provide you with information on what to expect when you are in hospital and after you go home following your knee arthroscopy.

What is an Arthroscopy?

The term "Arthroscopy" comes from two Greek words, "arthro" (meaning joint) and "skopein" (to look). Arthroscopy is a form of keyhole surgery in which a camera is used to look inside a joint. The camera is connected to a television screen which enables the surgeon to look throughout your knee joint.

Why do I need an arthroscopy?

Your surgeon should have made this very clear during your consultation. Generally speaking, there are two common reasons for performing a knee arthroscopy:

- 1.) Definitive diagnosis of knee injury and assessing the extent of wear and tear arthritis within the joint in order to plan future treatment.
- 2.) Dealing with common knee disorders, for example, repair / trimming of meniscal (cartilage) tears, removal of loose pieces of cartilage / bone, smoothing off worn areas of articular cartilage (gristle).

How is an arthroscopy performed?

In order to perform the operation, the surgeon will make a small cut (incision) through which a camera is inserted. This will enable the surgeon to look inside your knee. Several other incisions of the same size may be required in order to insert other instruments to deal with your knee problem.

Can I use an ice pack on my knee?

Using an ice pack on your knee will help to reduce pain and swelling following your operation.

It is however possible to get a burn from the ice and therefore it should be used with care and not placed over an area of skin that is numb.

- Wrap a bag of ice or frozen peas in a damp towel or pillow case and place it on the affected area
- You must change the position of the ice pack every 10 minutes until the whole area has been covered
- If you feel that the skin is becoming painful, for example burning or stinging, you should remove the ice pack and check your skin regularly for signs of a burn. It is completely normal for the skin to become reddened during the treatment.

Further Information

If you have any concerns or queries about your surgery, please contact the sports injuries nurse practitioner on **01691 404165**, or contact the sports injuries physiotherapists on **01691 404160**.

Alternatively you can contact your Consultant's secretary or your GP.

When can I go back to work?

This varies from person to person and depends on the speed of your recovery. In general, if you have a desk-based job, you may be able to return to work 5-10 days after your operation. If however, your job is more physical you may need to be off work for 2 to 4 weeks.

When can I drive my car?

You are not allowed to drive a motor vehicle for 48 hours after having a general anaesthetic. Once you have pain-free control of your operated limb you should be able to return to driving. If you have had a left knee operation and you drive an automatic car, you may be able to return to driving very soon after the 48 hour period.

When can I return to sports?

This entirely depends upon the nature of the surgery that was performed. Your surgeon / physiotherapist will provide you with further advice.

How do I remove my dressings?

You can remove the padded dressing yourself 48 hours after the operation. The small dressings underneath will need to stay in place until the wounds have healed. The wounds will take 10-14 days to heal and they will need to be kept dry and covered during this time.

At 10-14 days following the operation you will need to visit your GP practice nurse to have the dressings and stitches removed. Most wounds are closed with paper stitches ("steri-strips") which simply peel off.

Will I have an anaesthetic?

Normally this type of operation is carried out under general anaesthetic, however, in certain circumstances the operation may need to be performed using a spinal or local anaesthetic.

What to expect after an arthroscopy?

At the end of your operation, the small incisions may be closed with either stitches or tape (paper stitches). Small dressings will cover the incisions to keep them clean and dry. In addition, you will have a pressure dressing covering the knee.

You will be moved from the operating room to a recovery room. Once stable, you will return to the ward; normally this will be the Day Surgery Unit where you will be helped into a recovery chair. Pain medication is available if required following surgery, although most patients are comfortable having had local anaesthetic administered during the operation.

Before being discharged, you will be given advice about looking after the incisions, what activities you should avoid and which exercises you should do to help your recovery.

What are the possible complications?

Although uncommon, complications may occasionally occur during or following an arthroscopy. It is very common to experience localised numbness around the incisions and these may often ooze a little afterwards. The most common serious complications include:

- Infection
- Damage to nerves or vessels
- Excessive swelling or bleeding
- Pain and stiffness
- Blood clots (in the leg or occasionally the lung)
- Instrument breakage

After surgery, you **MUST** see a doctor urgently if you:

- Have pain or swelling in the joint which is getting worse. In particular, if the knee red, hot and tender, it may indicate infection or significant bleeding in the joint.
- Develop a high temperature
- See fluid, pus or blood coming from the incision

Commonly asked questions

Will I have a bandage?

Yes. You will have a bulky padded dressing on your knee from mid thigh to mid calf which should be removed 48 hours after the operation. You may find it easier to wear loose clothing or shorts whilst this padded dressing is on.

Your nurse or physio will give you full instructions about removing the padded dressing. If necessary, you will be provided with an elastic bandage ("Tubigrip") to wear during the day for approximately 2 weeks after the padded dressing has been removed.

Will I need to use crutches?

In most cases, crutches will not be required because you will be able to fully weight bear through the operated limb. In some circumstances your surgeon will recommend you use crutches for anywhere up to 6 weeks following the operation. Before you go home, you will be taught how to walk with crutches and, if required, how to go up and down stairs.

When will I be able to go home?

Normally you will be able to go home 2-3 hours after your operation. Before you go home you need to have eaten, drunk and passed urine. Before you come into hospital you will need to arrange for someone to take you home and to stay with you for 24 hours to ensure you are safe.

What can I do when I go home?

It is very important that you rest your leg for the first 48 hours after surgery. Walking too much or standing for too long may cause the limb to swell and become painful. You should rest with your leg raised, for example on a foot stool, when you are sat down for any length of time.

When will I see my surgeon again?

You will be given an appointment to see your Consultant / member of the team before you are sent home. Normally, you will be seen between 3 and 6 weeks after your operation.

When will I see the physiotherapist again?

If you require further physiotherapy treatment this can be arranged for you at the Orthopaedic Hospital or more local to where you live. If you would prefer to see your own physiotherapist or one more local to you, we recommend that you make your follow up appointment for between 5 and 7 days after your surgery.