

Knee Arthroscopy



Orthopaedic Surgery

patient**information**

Hearing about your experience of our services is very important as it means we can pass compliments to our staff and make improvements where necessary. Tell us what you think at feedback@rothgen.nhs.uk

Slovak

Ak vy alebo niekto koho poznáte potrebuje pomoc pri pochopení alebo čítaní tohto dokumentu, prosím kontaktujte nás na vyššie uvedenom čísle alebo nám pošlite e-mail.

Slovensky

Kurdish Sorani

كوردی سۆزانی
نه‌گهر تۆ یان كه‌سێك كه تۆ ده‌بناسی پێویستی به‌یارمه‌تی هه‌بێت یۆ نه‌وه‌ی لهم به‌لگه‌نامه به‌ تێبگات یان بێخۆتێنته‌وه، تکه‌یه به‌یوه‌ندیمان پێوه بکه له‌سه‌ر نه‌و ژماره‌یه‌ی سه‌ره‌وه‌دا یان به‌و نهمه‌یه‌.

Arabic

عربي
إذا كنت أنت أو أي شخص تعرفه بحاجة إلى مساعدة لفهم أو قراءة هذه الوثيقة، الرجاء الاتصال على الرقم اعلاه، أو مراسلتنا عبر البريد الإلكتروني

Urdu

اُردو
اگر آپ یا آپ کے جاننے والے کسی شخص کو اس دستاویز کی سمجھنے یا پڑھنے کیلئے مدد کی ضرورت ہے تو برائے مہربانی مندرجہ بالا نمبر پر ہم سے رابطہ کریں یا ہمیں ای میل کریں۔

Farsi

فارسى
اگر جناب عالی یا شخص دیگری که شما او را می شناسید برای خواندن یا فهمیدن این مدارک نیاز به کمک دارد لطفاً با ما بوسیله شماره بالا یا ایمیل تماس حاصل فرمایید.

If you require this document in another language, large print, braille or audio version, please contact Patient Information on 01709 424281 or email patientinformation@rothgen.nhs.uk

This patient information leaflet has been designed to provide you with some information about your surgery, recovery and rehabilitation, in addition to what your surgeon has already told you in clinic.

The Rotherham Knee Unit

The Rotherham Hospital Knee Unit is dedicated to providing the best service for knee problems and injuries, using the latest techniques and evidence based surgery. The unit is led by two dedicated Orthopaedic and Trauma Consultant Surgeons who both specialise solely in the diagnosis and treatment of knee disorders including sports related injuries. Both have undertaken sub-specialty Fellowship training in knee surgery.

The unit has considerable experience in knee arthroplasty surgery, arthroscopic meniscal surgery including meniscal repair, knee ligament reconstruction, as well as re-alignment surgery for deformity.

We have the dedicated support of our team of Consultant Orthopaedic Surgeon colleagues and physiotherapists who have the knowledge and experience to ensure you achieve the best possible outcome following your treatment.

Mr AJ Anderson FRCS Tr & Orth

Miss AJ Rees FRCS Tr & Orth

What is Knee Arthroscopy?

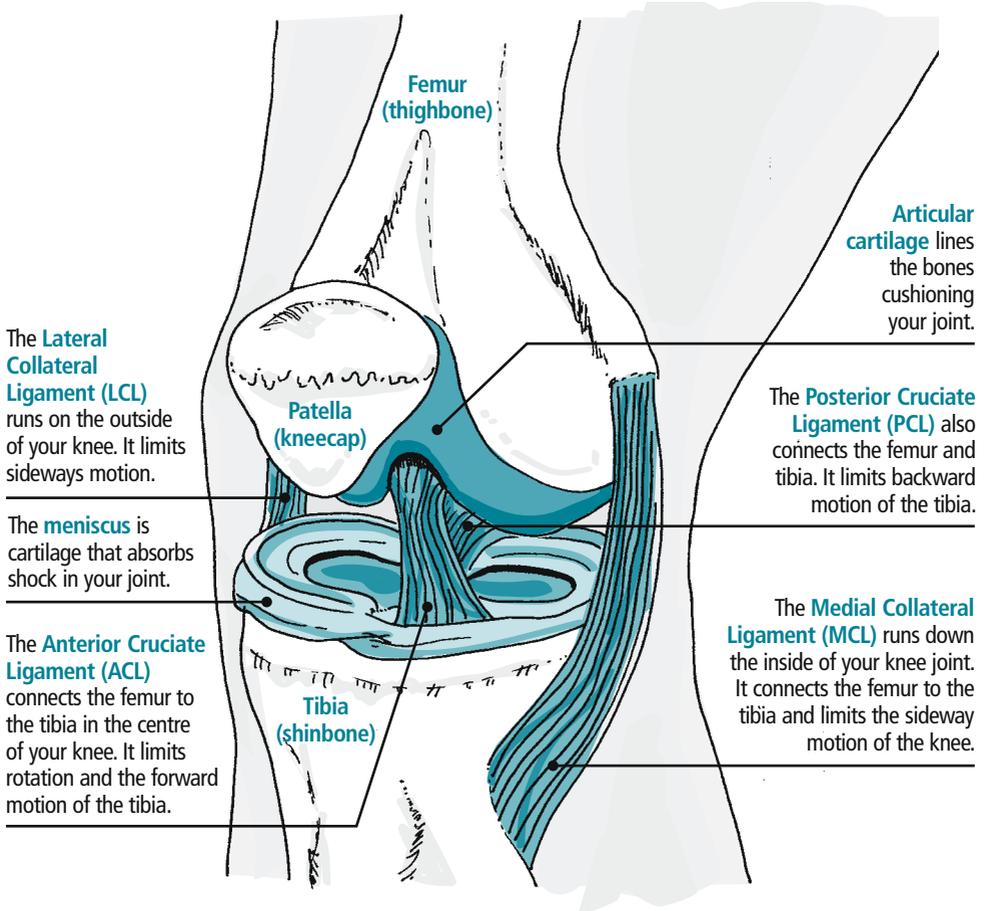
Knee arthroscopy is a 'keyhole' operation to look inside and treat problems in the knee. A small fibre-optic telescope (arthroscope) is inserted through small incisions (cuts) around the knee joint allowing the surgeon to see on a TV monitor the inside of the knee. Through other small incisions instruments are inserted to carry out the operation on the damaged part.

During the surgery the inside of the knee joint is examined for damage (diagnosis). Also some common knee problems such as cartilage tears (meniscal tears) can be treated at the same time. Your surgeon will explain to you in clinic what he is likely to find and do at your arthroscopy.

What common knee problems are diagnosed or treated this way?

- Torn cartilage (meniscus)
- Torn ligaments
- Damaged joint surfaces (osteoarthritis)
- Loose fragments of bone

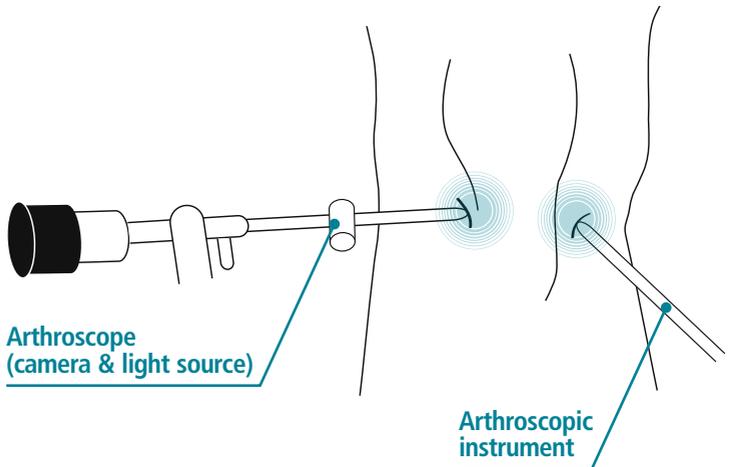
Diagram to show the structure of the knee



What will the operation involve?

Surgery will be done as a daycase operation and typically takes around 30 minutes. This means that usually you will go home on the same day as your operation.

A number of small incisions are made around the knee joint and the operation is done through these. Fluid is circulated around your knee joint as part of the operation.

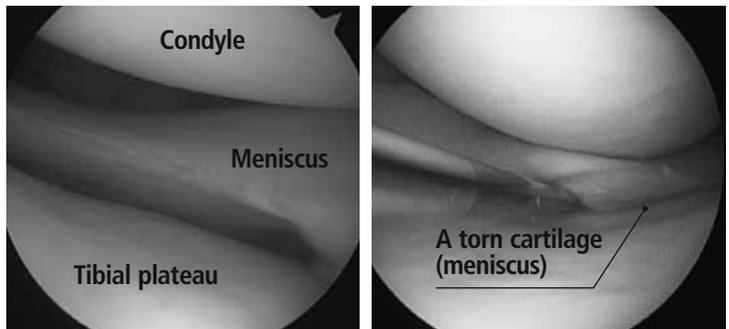


Knee Arthroscopy

What exactly is repaired or removed depends on what your surgeon has diagnosed in the clinic and what he sees inside your knee at the operation. For example if you have a torn cartilage the torn part will usually be removed (partial menisectomy) through the small incisions, although in some cases this may be repaired (meniscal repair). Again your surgeon will explain beforehand what he plans to do.

Usually some local anaesthetic is put inside the knee joint to make you more comfortable after the surgery. The small incisions may need one or two stitches, but often they are so small that sterile dressings are all that is required. The knee is bandaged after the operation for your comfort and to reduce swelling.

What your surgeon sees inside your knee joint



Knee Arthroscopy

What are the potential problems?

All operations have risks, but these thankfully are small with this operation. Your surgeon will discuss these with you before the surgery as they depend on the exact type of operation you are having and other factors such as your general health.

Wound infection (1-2%)

Treated with antibiotics.

Swelling

Your knee will be swollen after the operation and may take several weeks to settle.

Stiffness

This can be helped with physiotherapy.

Pain

Some chronic knee problems may continue to give you pain even after an arthroscopy eg. Osteoarthritis.

Skin numbness

Skin numbness around the front of the knee.

This usually resolves within 18 months.

Deep vein thrombosis (DVT) (1-2%)

Blood clots can occur with any operation but are rare with this operation. You will be walking on the same day as the operation and this reduces the risk of blood clots.

What happens at Pre-assessment?

You may be asked to attend a Pre-assessment clinic in which case you will be seen by a nurse who will ask you questions about your health and any medication you are taking. This helps check that you are ready to have an operation.

For you to go home on the day of the operation you must have a responsible adult to take you home by car and stay with you for 24 hours after the operation.

If there are any concerns about your health you may be asked to see an anaesthetist for an assessment.

What anaesthetic will I have?

Your anaesthetist will see you on the day of surgery and discuss and explain the anaesthetic options. There are two main options. These are a general anaesthetic (asleep) or a spinal anaesthetic (awake).

General Anaesthetic

This means the operation will be done while you are asleep.

Spinal Anaesthetic

A local anaesthetic drug is injected through a needle into the small of your back to numb the nerves from the waist down to the toes. Depending on the type of local anaesthetic the numbness will last for 2 -4 hours. If you wish you can watch your arthroscopy on the TV monitor and your surgeon will explain to you what he is doing during the operation. You do not have to watch and if

Knee Arthroscopy

you prefer your anaesthetist can give you some sedation to make you sleepy during the operation.

Please refer to the leaflet 'You and your anaesthetic' for more information.

What happens in Consent Clinic?

You may be seen by your surgeon again before the operation. The details of the operation will be discussed and you will be able to ask any questions you may have before signing the consent form.

What happens on the day of my operation?

The hospital will send you a letter before your operation with details of what time to arrive and where to go on the day of your operation.

You are asked not to eat or drink for 6 hours before your operation regardless of whether you are having a general or spinal anaesthetic.

Your surgeon will see you on the day of surgery and check that you are ready. You can also ask any other questions about your operation which your surgeon will answer.

A physiotherapist may also see you before your operation and give general advice on how to look after your knee following your operation to help the swelling go down.

What happens after my operation?

You will be taken to the Recovery ward from the operating theatre where a nurse will stay with you. You will be given strong painkillers if you need them. A special cuff may be wrapped around your knee that contains ice to help the swelling settle.

When you are back on the ward you will usually be given a light snack and a drink. You may also be given further advice from your physiotherapist on some exercises to do at home and the use of ice.

The nurses will telephone the person collecting you when you are ready to leave. You will be given some painkillers to take at home as well as details of your physiotherapy appointment and clinic appointment.

What happens when I get home?

You should rest and follow the instructions given to you by the physiotherapist to help reduce the swelling and gently start moving your knee again. You can usually put all of your weight through your knee and usually no crutches are needed. You will be told before you leave hospital exactly what you can do. Getting the movement back in your knee early after your operation is very important, and you will have to do your exercises every 4 hours. Full written instructions will be given to you.

The bandages stay on for up to 2 days after your operation. It is important that you drink 2 litres of water a day as this helps prevent blood clots.

What exercises will I be doing?

After your operation the physiotherapist will be helping you recover. It is very important that you follow the exercises they give you as this will help you recover more quickly.

You will be seen by your physiotherapist as an out-patient and your own exercise programme will depend on exactly what surgery was done at your knee arthroscopy.

Please remember that some patients will have longer recovery times than others, and that you may be asked by your surgeon not to put weight through your knee for several weeks after the surgery.

Return to vigorous sporting activities will be determined by what was found and done at your operation. If significant damage was present then you may be advised to avoid impact loading activities in order to prevent the onset of early arthritis developing within the joint.

When can I start driving?

You can usually start driving after 2-3 weeks. Your surgeon and physiotherapist will confirm when you are safe to drive.

How to contact us

Day Surgery

Telephone 01709 426500

7.00am until 7.00pm

Ward B2

Telephone 01709 424317

Ward B3

Telephone 01709 424316

Mr AJ Anderson's Secretary

Tel 01709 424575

Miss AJ Rees's Secretary

Tel 01709 424575

Switchboard

Telephone 01709 820000

Useful contact numbers

NHS Direct

Telephone 0845 4647

Health Info

Telephone 01709 427190

Stop Smoking Service

Telephone 01709 422444

Patient Services

Telephone 01709 424461

A&E

Telephone 01709 424455

**For GP out of hours,
contact your surgery**

Useful websites

www.nhs.uk

www.direct.gov.uk

www.therotherhamft.nhs.uk

We value your comments

If you have any comments or concerns about the care we have provided please let us know, or alternatively you can write to:

Patient Services

**The Rotherham NHS
Foundation Trust**

Rotherham Hospital

Moorgate Road

Oakwood

Rotherham

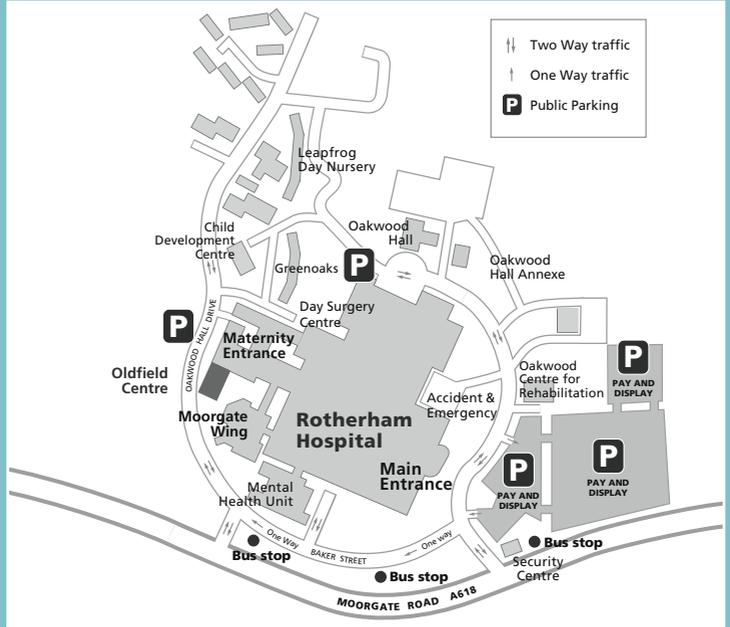
S60 2UD

Telephone 01709 424461

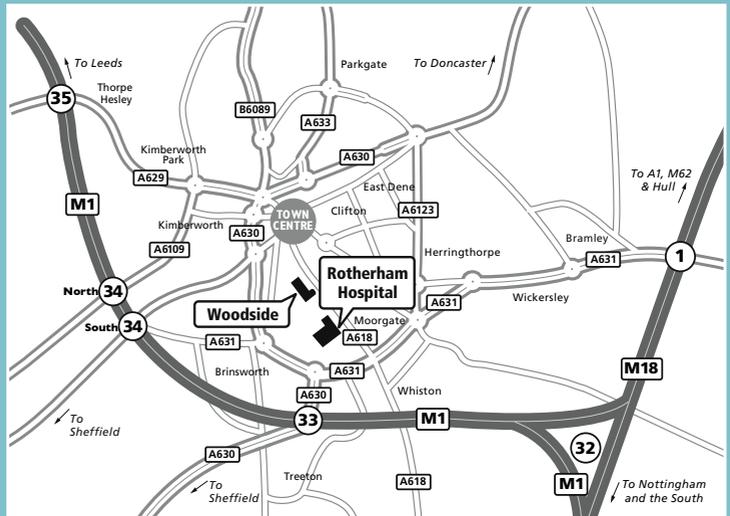
Email complaints@rothgen.nhs.uk

How to find us

Hospital site plan



Rotherham main routes





LS 658 11/12 V2 WFO



The Rotherham **NHS**
NHS Foundation Trust

Rotherham Hospital
Moorgate Road
Oakwood
Rotherham
S60 2UD

Telephone 01709 820000
www.therotherhamft.nhs.uk

