

**Healthier Communities,  
Outstanding Care**



**Sherwood Forest Hospitals**  
NHS Foundation Trust

INFORMATION FOR PATIENTS

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# Arthroscopic knee surgery

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**This booklet contains information about the knee surgery that you have been advised to have, and aims to answer some of the questions you may have about the operation and your stay in hospital.**

### **About knee surgery at Sherwood Forest Hospitals**

At our King's Mill hospital site, there is an elective orthopaedic ward (ward 21) and an elective day case unit (DCU). At our Newark site, there is an elective day case unit (Minster ward). The ward and site of your knee surgery will be discussed with you by your consultants' team in the outpatient clinic before your operation.

You will be admitted to one of these wards during your stay in hospital. On each ward, a 'named nurse' will be allocated to you to co-ordinate your nursing care. You will also have named physiotherapists to supervise your rehabilitation and help facilitate your discharge home.

You will usually be admitted to the hospital on the day of your operation, and you will usually go home the same day. If you think you will need transport to get home or help when you get home, please tell your named nurse when you first come in.

### **What to bring**

You need to bring in with you any medicines that you are taking, toiletries, a towel, nightwear, supportive footwear, and some loose and comfortable clothing. Please leave valuables at home.

### **Operation day**

Your anaesthetist will see you on the morning of the operation to discuss your anaesthetic with you.

You will be able to eat and drink as usual the day before your operation. You may be able to have an early morning drink on the day of your operation, but this needs to be discussed with the ward team prior to doing so.

**You must not smoke after midnight the day before the operation.**

## **Introduction**

This booklet is for people who have decided to have surgery after discussing the options, benefits and possible risks with their consultant. This guide has been developed to help answer any questions that you may have about your operation and recovery. It will be useful during each of your hospital visits so please bring it with you.

The booklet is a general guide and there may be alterations in your management made by your surgeon, anaesthetist, nurse or therapist. Those instructions should take priority.

All members of the orthopaedic team are committed to providing you with the highest standards of care and we look forward to helping you with your recovery.

## **What is this operation for?**

A knee arthroscopy is commonly performed if you suffer from knee pain, swelling or an unstable knee. An x-ray or scan may have been used to confirm the source of your knee problem; however, an arthroscopy may be needed to have a better look inside your knee joint.

An arthroscopy can also be used to treat the cause of your knee problem by trimming or repairing any of the damaged areas, aiming to reduce your knee pain and improve your function, so that you can return to normal activities.

## **Surgical procedure**

Two small incisions are made in the skin on the front or sides of the knee for the arthroscope to go into. The arthroscope is a narrow tube with a light and a very small video camera. This allows the surgeon to look all around the joint and locate the problem. Through the second small incision another instrument can be introduced into the joint to allow the surgeon to carry out any treatment. This may include trimming or removing any loose fragments of tissue, bone or cartilage, or taking a small sample of tissue from the joint for analysis. Arthritic joints can be 'washed out' using a sterile fluid which may relieve symptoms.

Once the surgery is finished the small incisions will be closed with steri-strips or stitches and covered with a small dressing. A large wool and crepe bandage will then be wrapped around the knee.

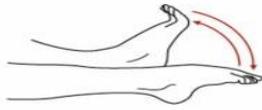
## **Physiotherapy**

Once you have recovered from your anaesthetic a physiotherapist will assess your mobility and go through your exercises prior to discharge.

Following your operation you should begin to do the following exercises as soon as possible. Please complete them three times a day, until your knee feels strong and is moving easily.

## Exercises following your knee surgery

Repeat each exercise 10 times, 3 times daily.



### Ankle pumps

To help aid circulation, bend and straighten your ankles briskly in lying or sitting.



### Static quads

Lie or sit with your legs straight out in front of you. Pull your toes towards you and push your knee down firmly against the bed.



### Straight leg raise

Lie or sit with your legs straight out in front of you. Pull your toes towards you, keep the knee straight and slowly lift the leg off the bed. Hold for 5 seconds then slowly lower the leg back down.

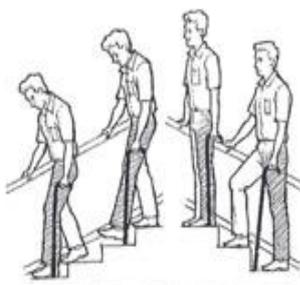


### Knee flexion and extension

Slide your heel backwards to bend your knee as far back as possible, hold for 30 seconds. Then slide your foot forwards to get the knee straight. Repeat.

## Walking after your knee arthroscopy

It is important that you can walk safely following your knee surgery. Not every patient will need a walking aid. However, if you are in pain or feel unsteady then you will be shown how to use elbow crutches. This allows you to put less weight through the joint and assists your balance.



**Stairs up:** Lead with your good leg, followed by your operated leg and crutch.

**Stairs down:** Lead with your crutch, followed by your operated leg, then your good leg.

## **Additional information**

### **When can I go home?**

- When you have recovered from your anaesthetic.
- When your pain is controlled.
- When you have learnt your exercises.
- When you are safe to return home.

### **What happens when I go home?**

#### **Rest**

It is important to establish a balance between the amount that you exercise and the amount that you rest. We advise that you rest and elevate the operated leg on a stool or something similar for 20 minutes every two to three hours initially. This will help with any discomfort and control swelling. In addition you may also use an ice pack on your knee to help with swelling and pain. The ice pack can be applied for 20 minutes every two to three hours. Wrap the ice pack in something like a tea towel so that the ice pack is not in direct contact with the skin.

#### **Dressings**

The bandage may become slightly blood stained; this is to be expected and should not be cause for concern. You can remove the wool and crepe bandage 48 hours after the operation, leaving you with two small adhesive dressings over the wound. It is advisable to keep the wound clean and dry. The nursing staff will advise you regarding the removal of stitches and having your wound checked. This will normally be 10 to 14 days following your operation and will be performed by the practice nurse at your GP surgery or by a district nurse.

#### **Outpatient physiotherapy**

Following your knee arthroscopy you do not normally require outpatient physiotherapy, but in some cases your surgeon will request it. This is generally arranged for you at your nearest hospital but we will discuss this with you during your stay.

#### **Clinic review**

A follow up appointment with your consultant's team will be made for you. You will receive details of this appointment in the post following your discharge from hospital. The appointment is generally 6 weeks following your operation.

#### **Return to activities**

Only return to your usual activities when you feel ready and comfortable. You may have some discomfort and swelling in the joint and surrounding muscles. This is to be expected. Continue to take your painkillers as advised by the nursing staff. Rest, elevation and an ice pack will help.

#### **Driving**

It is important that you do not drive for at least 48 hours following your surgery. After this time it is then your decision when you feel able to resume driving.

You must be comfortable and able to act appropriately in an emergency situation, i.e. perform an emergency stop safely. You should check your insurance policy too as you may need to inform your insurance company of your operation.

### **Work**

Most people are able to return to work within two weeks of surgery. If you have a more manual job which includes lifting, bending, kneeling or carrying then you may need some extra time off. Please consult your GP if this is the case.

### **Sports/hobbies**

Most people should be able to return to their sports and hobbies following their arthroscopy. Start exercising when you feel able to and gradually increase the amount that you are doing. Increased pain and swelling are signs that you may be doing too much too soon, so reduce your activity levels and build it up again gradually once the symptoms have settled. You should slowly return to doing these, starting with activities such as cycling, which put less weight through the knee. It is also good to get into the swimming pool once your wounds are fully healed. You should gradually be able to return to higher impact activities such as running as the pain settles. If you are unsure then wait until your consultant review.

### **Further sources of information**

NHS Choices: [www.nhs.uk/conditions](http://www.nhs.uk/conditions)

Our website: [www.sfh-tr.nhs.uk](http://www.sfh-tr.nhs.uk)

### **Patient Experience Team (PET)**

PET is available to help with any of your compliments, concerns or complaints, and will ensure a prompt and efficient service.

**King's Mill Hospital:** 01623 672222

**Newark Hospital:** 01636 685692

**Email:** [sfh-tr.PET@nhs.net](mailto:sfh-tr.PET@nhs.net)

If you would like this information in an alternative format, for example large print or easy read, or if you need help with communicating with us, for example because you use British Sign Language, please let us know. You can call the Patient Experience Team on 01623 672222 or email [sfh-tr.PET@nhs.net](mailto:sfh-tr.PET@nhs.net).

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