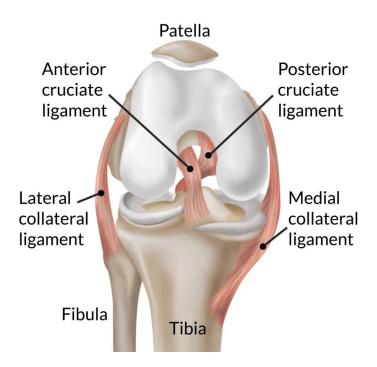
What happens during knee arthroscopy

Arthroscopic knee surgery is done to examine the knee joint and to do minor surgery such as clean the joint surfaces or remove pieces of bone, tissue, cartilage, staples or screws. During the surgery, a lighted telescopic lens called an arthroscope is inserted to see directly into the knee joint. Several small cuts (about ½-1cm each) are made in the skin in order to place the arthroscope and surgical instruments.

Arthroscopic knee surgery is done in the Operating Room, most commonly under a general or spinal anesthetic. It takes between 30-60 minutes. It is Day Care Surgery meaning you go home the same day as the surgery.



Going Home:

• Arrange to have someone take you home after surgery even if you are planning on taking a taxi

Bathing:

- Keep your dressings dry for the first 2-3 days after surgery. Cleanse around the area or use a plastic bag sealed with duct tape to keep the dressings dry.
- If the dressings get wet, change them
- If your wound does not have any fluid coming out of it, you may get the wound wet in the shower 3 days after surgery
- You may bathe or swim 2 weeks after surgery, if the wound is healed and dry

Care of your Incision & Wound:

- You do not need to change your dressings if you do not want too -- you can just leave them clean, dry and covered until your follow up appointment 10-14 days after surgery. Most patients prefer to take off their dressings and change them.
- The tensor band should be snug but not too tight. If the tensor is applied too tight (causes tingling or change in skin colour), loosen and reapply
- If the tensor is too loose, take it off and re-wrap it snuggly
- If you want to get your leg wet in the shower, you may do so 3 days after surgery if the wound is dry
- Take the dressing off before you shower and put a new dressing on after your shower

How to change your dressings:



- Wash your hands with soap & water before you take care of your wound
- Remove tensor bandage
- Throw out the white gauze bandages—the dressings will be stained with blood - and remove the white mepore dressings.
- Do not remove the Steri-Strips- small tapes that are right on top of the wound. They will fall off themselves.
- Cover wounds with new dressing. Apply new 'mepore' or you may use "bandaids".
- Buy 'mepore' dressings at pharmacy. You must apply a new mepore dressing after each shower.
- After you change your dressing, put the tensor back on starting to wrap the leg below the knee and then work your way up.

Weight bearing:

- Almost all patients are told to walk on their leg as is comfortable. Crutches or canes may but used for comfort but are optional. Usually, they would only be needed for a few days
- In some less common situations, your surgeon may tell you to stay off the leg and use crutches (e.g after a mensical repair). Follow your surgeon's instructions

Activity:

- Slowly restart your regular activities
- Elevate your leg so that it is at the level of the heart for the 48-72hrs after surgery
- If swelling increases following activity, rest and put your foot up
- Discuss when to return to sport with your surgeon

- You may begin the Range of Motion exercises on the last page of this handout right away unless told otherwise by your surgeon
- Your surgeon will tell you if you need to attend physiotherapy

Pain:

- Discomfort will be moderate for the first few days and will gradually get better
- Use pain medications as instructed by your surgeon
- Gradually reduce pain medications as your pain decreases

Swelling

- Expect swelling for a few weeks following the surgery.
 This is due to inflammation and fluid that was introduced into the joint during surgery
- When resting, sit with your leg elevated.

Icing:

- Apply ice packs or use a Cryo Therapy 'Ice Machine' to reduce pain and swelling
- Apply ice for 10-15 minutes, 4-6 times per day
- Never apply ice directly to skin

Return to Work:

- When you are able to return to work depends on:
 - o the kind of job you have and its physical demands
 - how much pain & swelling you have after your surgery
 - o how your recovery is progressing
 - if you are able to modify your job or work from home



- Your surgeon will help you decided when to return to work
- Expect to take off at least 2-4 days for a desk job that does not require much walking
- Expect to take off 1-3 months for more physically demanding work

Healthy Eating:

- Start with clear fluids after surgery
- Gradually increase to a well balanced diet as your appetite allows
- Drink at least 6 cups of fluids daily

Going to the Bathroom:

- Changes in medications, activity and diet can cause constipation (hard, dry bowel movements)
- To avoid constipation: drink lots of fluids, eat high fibre foods such as prunes, fruits, bran, whole grains and vegetables
- Take a stool softener or laxative if needed. Ask your doctor or pharmacist to suggest one.

Smoking:

- Smoking causes problems with the healing of bones and tissues
- Not smoking or smoking less in 2 months before and in the 3-6 months after surgery will reduce the chance of a problem with healing
- visit www.quitnow.ca for information about tools and medications to help you quit smoking

Driving:

• Do not drive while taking pain medications.

- You must be able to walk confidently without crutches in order to safely drive with your right leg
- If your ability to safely drive (e.g swerve sharply, perform an emergency stop) is impaired, your insurance may not be valid in the case of an accident
- Discuss with your doctor when it is safe to drive

Your Medications:

Resume your regular medications unless instructed otherwise by your doctor

Supplies/special equipment:

- Crutches may needed required and can be obtained from a medical supply store, the hospital, some pharmacies or One Bracing @ Rebalance^{MD}
- Cryotherapy "ice machines" are optional but can be helpful to reduce pain and swelling. These can be bought at One Bracing @ Rebalance^{MD} or other medical supply stores such as McGill & Orme, Island Orthotics and others
- Bauerfeind Genutrain: This is a compression sleeve for the knee that helps control swelling after knee injuries or surgery. Many patients find that they have swelling for weeks- months after the surgery and like to have a light supportive brace to help the knee feel more secure and control swelling. This kind of brace can be used as an alternative to a tensor bandage. This can be obtained from One Bracing @ Rebalance^{MD}

Follow Up Appointment:

• A post-operative appointment should be scheduled for approximately 10-14 days after surgery

- Call the office if you do not have an appointment scheduled
- Write down your questions for the doctor before the appointment

Call your Surgeon if you have:

- Worsening pain or swelling that does not get better with elevation and ice
- Incisions that are red, puffy, hot or leaking fluid more than 48 hrs after surgery
- Fever greater than 38.5°C
- Signs of circulation problems in your leg (e.g coolness, change in skin colour, numbness) which is not relieved by loosening the tensor and elevating
- Chest pain or shortness of breath that is unusual for you.

If you cannot reach your Surgeon:

• Call your family doctor, go to a walk-in clinic or hospital emergency department

Non-emergency health information and services:

- HealthLinkBC www.healthlinkBC.ca
- Tel: 811 from anywhere in BC
- Tel: 711 for deaf and hearing impaired assistance (TTY)

The information in this handout is intended only for the person it was given to by the health care team. It does not replace the advice or direction given to you by your doctor.

Simple Knee Range of Motion Exercises

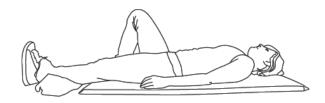
You can begin these exercises the day of surgery unless your surgeon tells you otherwise. Do exercises 2-3 times per day and repeat each action 5-10 times, holding for 15-30 seconds.

Knee Straightening & Thigh (Quad) Squeezes:

- Keep kneecap and toes facing ceiling
- Pull toes towards you
- Tighten muscles in front of thigh and push back of knee into bed



 add a towel underneath the heel to help the knee straighten



Knee Bending Exercises:

 Bend knee and place hand or towel behind thigh to pull heel towards bottom



Assisted Knee Bending:

- Sit on firm chair
- Cross non-operated leg over operated leg
- Gently push with non-operated leg until stretch is felt on the front of operated knee

Active Knee Bend:

- Lie on stomach
- Bend knee, bringing heel towards bottom
- Use non-operated leg to bend operated leg



