

WHAT IS KNEE ARTHROSCOPY?

Knee arthroscopy is a procedure making three tiny incisions that allows the doctor to place a small fiber optic camera into the knee. The other incisions are used for the placement of instruments. This procedure is indicated for the treatment of cartilage or meniscus tears, articular damage, infection, or diagnostic purposes. In most cases it is performed as an outpatient (same day procedure).

MRI (Magnetic Resonance Imaging):

If your doctor is unclear on the extent or nature of your condition he may order an MRI. Magnetic Resonance Imaging is a technique that allows your doctor to view the soft tissues and joints more clearly than on plain x-rays. This can help your physician determine your course of treatment.

COMMON TYPES OF CONDITIONS:

Meniscal Tears:

The medial and/or lateral meniscus is subject to tears during twisting injuries or degenerative changes over time. Most tears require the portion of the torn meniscus to be removed arthroscopically. In some cases a torn meniscus can be repaired. Both of these procedures can be done arthroscopically.

Chondromalacia:

Chondromalacia is the wearing away of the smooth articular cartilage that lines the ends of bones. This can occur for many reasons. The most common is initial trauma to the articular cartilage that continues to wear away the cartilage in that area. Loose bodies in the knee or a meniscal tear can wear away the articular cartilage. Rheumatoid arthritis and osteoarthritis also involve wearing away of the articular cartilage (degenerative joint disease). This condition can be treated with a knee arthroscopy during which the surgeon uses a small shaver to smooth the roughened cartilage.

PREOPERATIVE INSTRUCTIONS

Do I stop my medication?

No. You should not stop taking any of your medications unless instructed by your doctor. Prior to arthroscopic surgery you will usually be asked to stop taking anything that can thin your blood (aspirin, Coumadin, anti-inflammatories, etc.). St. John's Wart (an herb) must be discontinued 10 days prior to surgery. Make sure your physician has a complete list of all of your medications including vitamins and supplements.

Can I eat or drink before surgery?

No. For safety reasons, your stomach must be empty at the time of surgery. You will be instructed not to eat or drink anything after midnight the night before surgery. If you do eat or drink anything, your surgery will be cancelled. If you are diabetic, inform your doctor so your surgery can be scheduled earlier in the day.

Preoperative Lab Work:

Routine laboratory work is required prior to surgery. In addition, a nurse from the hospital will conduct a comprehensive medical interview prior to surgery. The surgery scheduler will set an appointment for you to do the interview and required lab work. If you have had lab work, chest x-ray or an EKG done recently, bring it with you to the interview appointment. It may not need to be repeated.

SURGERY

Knee arthroscopy is done on an outpatient basis (same day surgery).

Anesthesia:

For most people this procedure requires a short-acting general anesthetic as the patient's leg must be completely relaxed during the surgery. The best way to achieve this is through general anesthesia where the patient is put completely to sleep.

What time will my surgery be?

The surgery times are not decided until the day prior to surgery. Many factors influence the order and start times of surgical cases. During your preoperative interview you will receive instructions regarding the time you need to arrive for surgery.

Postoperative Appointment:

Upon discharge from the surgery center your postoperative instruction sheet will list your postoperative appointment time. The appointment will usually be 5 to 8 days after your surgery.

Day of Surgery:

You will arrive about 1½ hours prior to surgery. Surgery takes about one hour. You will spend some time in recovery and will be allowed to go home when you have recovered from the anesthesia. Someone will need to drive you home.

Complete instructions for postoperative care will be given to you by the recovery room nurse. In most cases your dressings may be removed 3 days after surgery. Band-Aids can be applied over the incisions. New Band-Aids are available that are waterproof and can be used to keep incisions dry. You must keep the incisions dry for one week. Your doctor will instruct you specifically when you can get the incision wet.

RECOVERY

Recovery from knee arthroscopy involves two stages. The first stage is initial recovery from surgery. The second phase is physical therapy.

PHYSICAL THERAPY

At the time of your postoperative appointment with the doctor, he will determine the extent of your postoperative physical therapy. You will be given a prescription for physical therapy at that time.

DISCLAIMER

This brochure contains general information regarding knee arthroscopic surgery. For specific questions, please contact your doctor. This surgery, like most surgeries, does involve the potential for risks and complications. Make sure you understand all potential risks and complications such as infection, blood clots, anesthetic complications, etc.

RETURNING TO WORK & ACTIVITIES

Check with your doctor regarding specific estimates in your case. In general, returning to a manual labor job or sports activities will be at least 6 to 8 weeks. If you are able to work a sedentary job, you could possibly return to modified light duty within two weeks after surgery.



IMPORTANT DATES AND TIMES

Patient Name: _____

Surgery Date: _____

The time of your surgery is not determined until the day before. The hospital will call you the day prior to surgery to inform you of the time.

PREOPERATIVE INTERVIEW

Date: _____

Time: _____

**The Bone & Joint Institute
47-647 Caleo Bay, Suite 200
La Quinta, CA 92253**

Phone: (760) 777-8282

**PATIENT GUIDE
TO KNEE
ARTHROSCOPY**

**L. SAM REBER, M.D.
ANDY LOVATO, PA-C**