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Knee Arthroscopy - Patient Information

Your doctor has determined that you will require an arthroscopy of your knee. This operation involves an admission to hospital and the administration of an anaesthetic. Once anaesthetised, a tourniquet is applied to the affected leg and two small incisions are made over the knee joint, just next to the kneecap tendon. An arthroscope, connected to a video camera, is then introduced into the knee joint where the abnormalities can be visualised and treated.

Why is arthroscopy necessary?

The following conditions are often treated with arthroscopy: torn meniscus, loose cartilage or bone fragments. Torn ligaments, joint inflammation. Most tears of the meniscus are not repairable. Some tears are, and the possibility of meniscal repair would have been discussed with you by your surgeon if you have this type of tear.

How many incisions will I have? Most often there are two small 3mm incisions of either side of the kneecap tendon. Occasionally one or two more are necessary.

How long will I be in hospital? This is day only surgery. Dr Coffey usually will see you prior to discharge.

When can I walk?

Most patients are able to walk without the aid of crutches on the day of surgery. You may use crutches initially after your operation if you have a lot of pain, or feel unsteady to walk. Driving should be avoided for at least 24 hours or until walking comfortably.

What do I do with the dressings?

After surgery you will have a bulky dressing on the knee. This is to absorb any bleeding as well as keep the wounds free of contamination. It should be left on for 48 hours. You may then remove the dressing and replace it with small bandaid style dressings. An elastic bandage may make the knee feel better and reduce swelling, as long as it not too tight.

When may I shower?

You may shower after the first dressing is removed. Do not soak or scrub the wounds. Replace dressings with band-aid style dressings.

What exercises should I do?

You should start your exercises the day following your surgery. you can start on the day of your surgery if you are comfortable.

1. Heel slides. Lying on your back gently slide your heel towards your buttock as far as comfort allows. The slide heel back until the knee is fully extended. Repeat 10 times.
2. Quadriceps sets: with knee fully extended tighten the front thigh muscle and hold for 5 seconds, then relax. Repeat 5 times.
3. Formal physiotherapy may be prescribed if required at your post-op visit.

What Pain relief will I need? Simple painkillers such as Panadol or Panadiene Forte may be given. Anti-inflammatories may also act to give relief if needed. Ice packs are good to reduce swelling and pain. If severe pain occurs please contact Dr Coffey's rooms.

Are there any potential complications?

As with all surgery there are potential complications. Fortunately they are rare. Some of these complications include infection, deep vein thrombosis, nerve injury, persistent pain. If you are concerned about these before or after surgery please contact Dr Coffey's office for advice.