

Dr Tom Savvoulidis
Orthopaedic Surgeon MBBS, FRACS (Ortho)

Knee Arthroscopy

**Adelaide & Regions
General Orthopaedics**

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PROVIDING SERVICES IN:

- Arthritis and Joint Replacement Surgery
- Special interest in Minimally Invasive Surgery (MIS) for hip replacement
- Arthroscopic and MIS surgery of upper and lower limbs
- Sports Injuries
- Foot and Ankle
- Wrist and Hand

DR SAVVOULIDIS CONSULTS AT:

Burnside Hospital

Suite 3, 120 Kensington Road
TOORAK GARDENS 5065


Central Districts Private Hospital

25-37 Jarvis Road
ELIZABETH VALE 5112

North Eastern Community Hospital

580 Lower North East Road
CAMPBELLTOWN 5074





In this procedure, while under anaesthetic, the interior of the knee joint is examined.


Through small puncture incisions in the patient's skin Dr Savvoulidis inserts the arthroscope into the joint. With the arthroscope, problems with the cartilages, joint surfaces and lining membrane can be dealt with.


Some of the most frequent conditions found during arthroscopy of the knee joint are torn cartilage, torn ligaments, loose fragments of bone or cartilage, damaged joint surfaces and inflammation of the joint lining .

Most cases are done as day surgery, and you are ready to leave hospital several hours after the surgery has been completed. Once fully conscious and when you can raise your leg straight off the bed and you can walk under supervision, you may go home as long as there is one adult there to supervise you.

The bandage on your knee should be retained for 4-5 days and kept dry. It can then be removed but leave the adhesive strips over the incisions until the strips peel off the stab sites. The small surgical wounds from the arthroscopy cause minimal scarring and usually do not require stitching.

Your knee will be sore and swollen for a while.






During the day you should frequently go for short walks and exercise the knee. Straight leg raising should be repeated often and knee bending should be practised, within limits of discomfort.

You can wash gently over the knee in the shower after 5 days.

It is usual for patients to go back to work or school within a few days. Every person who has arthroscopic surgery can have many different diagnoses and pre-existing conditions so each person's recovery time will be different.

If you have undue pain, swelling, redness of the knee or the incision sites, contact the clinic nurse or Dr Savvoulidis at his room or your general practitioner.

A post op appointment will be made for you, usually 10—14 days following your surgery.



Knee Exercises

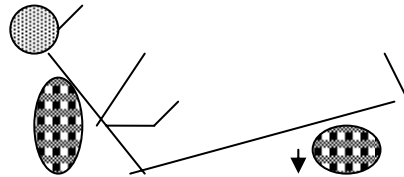
- **Ankle Pumps and Deep Breathing**

Move both feet up and down through full range 10 times hourly to avoid blood clotting. Take 2 deep breaths and cough to prevent chest infection.

- **Knee Extension**

It is very important to regain full extension of the knee soon after your surgery. Place a roll under your ankle and allow the knee to relax out straight for 5-10 minutes.

Do 3 - 5 times per day.



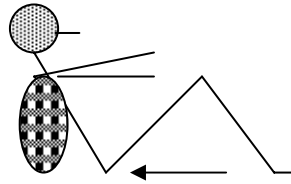
Static Quadriceps

Place a roll under your ankle. Tighten thigh muscle and brace to straighten. Hold 3 seconds. Do 10 times, _____ times per day.



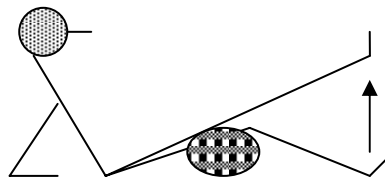
Hip and Knee Bending

Place your hands under your thigh and help to slide your heel towards your buttock, allowing your knee and hip to bend. Do 5 times, _____ times per day.



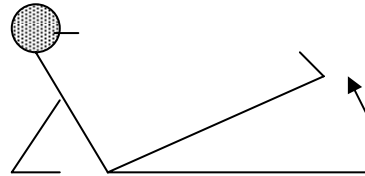
Inner Range Quadriceps

Place a rolled towel under your knee. Push your knee down into the roll and lift your foot off the bed to straighten your knee. Hold for 3 seconds. Do 10 times, 3 times a day.



Straight Leg Raise

Brace knee, then lift your leg straight off the bed. Try to keep knee “locked” Hold 3 seconds. Do 10 times, 3 times per day.



NOTES



