

Any swelling should disappear in ten days, but sometimes it can last two to three weeks. You should not drive for at least two weeks following the operation.

### **Are there any risks?**

This is generally a very safe operation but there are some risks associated with any operation. Occasionally there can be bleeding into the joint. If it becomes very tight and swollen come to the hospital emergency department as the blood may need to be removed under local anaesthetic.

Again occasionally there can be a small risk of infection. If your wounds get red and swollen, with a smelly discharge and/or you have a temperature, contact your doctor.

### **Any further questions?**

If you have any more questions please phone the day treatment centre on 020 7288 5098 Monday – Friday 8.00am – 5.00 pm or phone NHS Direct on 0845 4647

**Whittington Health**  
Magdala Avenue  
London  
N19 5NF  
Phone: 020 7272 3070  
Date published: 14/02/2012  
Review date: 14/02/2014  
Ref: DTC/A1/3

©Whittington Health

Please recycle

Your knee may be painful for a few days, you will be given a prescription for some painkillers such as coproxamol, your nurse will advise you on this.

The doctor or nurse will advise you when you can remove your crepe bandage. The steristrips should stay in place until your outpatient appointment, try not to get them wet when bathing. We will give you an exercise leaflet for your knee we will also give you an outpatient appointment for two weeks when the doctor will advise you about resuming sport and driving.

If you have stitches they will be removed at the outpatient clinic. A letter will be sent to your doctor and a copy given to you.

### **Going home**

Please make sure that you have a responsible person to take you home and stay with you for the first 24 hours when you should rest. Do not drink, drive or operate machinery including kettles and cookers for 48 hours after your operation to allow the anaesthetic to wear off. You can go back to work and resume normal activities about the house after a few days.

**Exception**, if you work or getting to work involves long periods of standing and a lot of activity it is best to wait until your outpatient appointment, you should check with your doctor if you are unsure.

## **Knee arthroscopy**

### **A patient's guide**

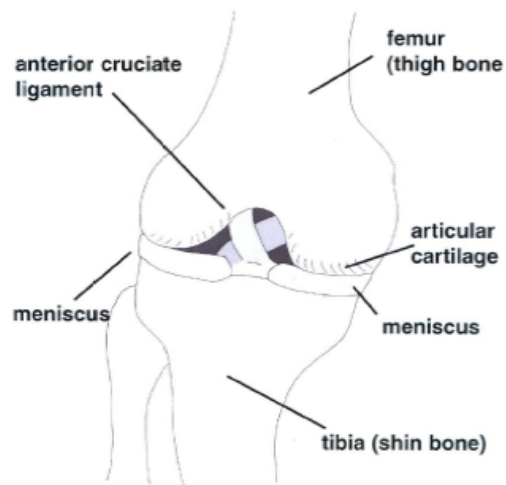


.... caring for you 

This information is for patients who are having an examination of the knee joint known as a knee arthroscopy. It explains the reasons for having it, what is involved and any significant risks that there may be.

### What is a knee arthroscopy?

This is an operation to examine the inside of the your knee joint using a slim telescope with a camera attached, so that the doctor can diagnose the problem. He/she may be able to treat it at the same time or a further operation may be needed.



The benefits of having an arthroscopy

**Knee injury** – following a knee injury there may be damage inside the knee joint such as a torn cartilage, a torn ligament, or loose pieces of bone, this sort of damage can be treated during the operation.

**Osteo arthritis** – this affects the bone surfaces which becomes worn, particularly where the bones move over wash other and can be very painful. The doctor can wash out the knee during the operation, which can help reduce the roughness and remove any loose particles.

**Biopsy** – occasionally a tissue biopsy (a tiny sample of tissue or bone) can be taken from inside the knee for further investigation at the laboratory.

### What preparation do you need?

You may have an magnetic resonance imaging (MRI) scan which can give detailed pictures of the inside of your knee joint and will help confirm the doctors diagnosis. A few weeks before your arthroscopy you will have a medial check-up with the nurse. See the general anaesthetic information leaflet.

**Important** – you should not eat anything for at least six hours before a general anaesthetic. You may have sips of water up until two hours before our operation.

### On the day of your operation

- Please go to the day treatment centre on the date and time given in your letter.
- The doctor will see you before your operation, and you will be asked to sign a consent form to confirm that you understand the procedure and agree to go ahead with it.

- The anaesthetist will see you to discuss your anaesthetic
- You can ask any more questions you may have at this time.

### What is involved?

You will normally have a general anaesthetic and should be able to go home on the same day. Occasionally you can have a local anaesthetic if your doctors agrees that it is suitable for you.

Two to four small cuts are made in your knee, into one the doctor passes a slim telescope with a camera, which transmits pictures onto a screen and into the other, the instruments to repair the problem.

The operation takes about 40 minutes. You will have small steristrips (paper strips) over the wounds and a large supporting bandage. In some cases stitches may be necessary.

### After the operation

You will recover in at treatment centre for about an four hours. You will be offered toast and a hot or cold drink, as soon as you feel like it. The doctor will se you after your operations and tell you the result. You can go home after your nurse has checked you. You should be able to walk out of the ward without crutches, but for some patients it is necessary to keep the weight off the knee, in which case you can borrow crutches.