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**KNEE ARTHROSCOPY - INFORMATION SHEET**

**INDICATIONS AND GOALS FOR SURGERY**

This procedure is indicated for patients who have knee pain, loss of knee function, and/or knee instability. The surgery allows the surgeon to visualize the anatomic injury within the knee joint and address the injury.

**DESCRIPTION OF THE SURGICAL PROCEDURE**

The procedure is performed in the operating room. The patient will be provided anesthesia by an anesthesiologist, which may include a general anesthetic where the patient is put to sleep and/or a regional anesthetic where an injection is performed near the nerves in the thigh to provide pain relief.

During the procedure, the surgeon will make a number of small incisions surrounding the knee and a camera is introduced. The camera is used to visualize the anatomic structures within the knee joint and further diagnose the specific problem. Depending on the type of injury identified, the surgeon may address the injury by introducing instruments into the joint through small incisions. In some cases, the surgeon may need to make a larger incision to complete the procedure open.

During the procedure, the surgeon may use implants to repair the injured structures in the knee. These implants are made of varying materials including metals, plastic or other composite materials. Some are designed to remain permanently in place; others may be slowly reabsorbed by the body.

Depending on the type of procedure, the patient may be placed in a knee brace, knee immobilizer, or simple ace bandage following the procedure. Specific instructions regarding weight bearing status, wound care, medications, movement of the leg, and physical therapy will be provided by the surgical team based on the procedure(s) performed.

**REHABILITATION**

Rehabilitation will be discussed after the procedure(s) is complete. Prior to discharge, the patient will be given specific instruction on which, if any, exercises they should perform at home prior to their first post-operative appointment. At the patient's first post-operative appointment the patient will be provided with a physical therapy prescription and rehabilitation protocol as deemed appropriate by the surgical team. Full recovery

after surgery is a process that will take weeks. The patient's motivation and willingness to participate in the rehabilitation program are critical in the ultimate outcome of the surgery.

### **POTENTIAL BENEFITS**

The potential benefit and purpose of the surgery is to improve the condition of the knee. This benefit may include improvement of function of the knee, decrease in pain, and/or improvement in stability. As with any surgical procedure, there is no guarantee of success. In rare cases, the knee may be made worse following the procedure. The surgeon can provide specific information regarding the expected results following the specific procedure.

### **POTENTIAL RISKS**

In general, arthroscopic knee surgery is extremely safe, highly successful, and is associated with minimal complications. Certain risks may be increased or decreased depending upon the type of procedure being performed and the extent of the injury. Material risks of knee arthroscopy are rare and include, but are not limited to: post-operative bleeding, persistent swelling, post-operative infection, blood clots, nerve injury, blood vessel injury, stiffness, fracture, cosmetic deformity, recurrent instability, equipment failure, hardware complications, persistent pain, function deficit, bruising, and/or swelling.

### **ALTERNATIVES TO SURGERY**

In many cases, alternatives to surgery are available. One alternative is to undergo no further treatment and live with the knee in its current condition. Conservative (non-surgical) treatment which includes medications, physical therapy, activity modification, and/or injections may be an alternative to surgery. The surgeon can discuss with the patient if such treatments are indicated.

### **CONSEQUENCES OF DECLINING CARE**

Surgical intervention has been recommended to improve the patient's knee condition. The injuries are not life threatening and thus the surgery recommended is elective. Shall the patient elect not to proceed with surgery, possible consequences include persistent or worsening pain and/or loss of knee function. In some cases, knee injuries may become worse overtime if not treated, resulting in permanent pain or loss of function.

### **MEMBERS OF THE SURGICAL TEAM**

The Attending Orthopaedic Surgeon will perform the procedure. All key portions of the procedure will be performed by an attending physician. He/She will require the assistance of their team during the surgery for important tasks related to the surgery. Members of the team may include: Physician Assistants.