

PATELLAR STABILISATION SURGERY

MR NICHOLAS FROST

MBBS FRACS (Ortho) FAOrthA
ORTHOPAEDIC SURGEON

GOALS OF SURGERY

The goal of patellar stabilisation surgery is to prevent dislocation of your patella (knee cap). This surgery may include a combination of arthroscopic and open techniques and may include ligament reconstruction or bony surgery (osteotomy). Your knee cap should be more stable immediately after surgery, although it will take approximately 12 weeks for the postoperative changes to settle.

BEFORE COMING INTO HOSPITAL

Preadmission Letter & Estimate: These will be provided to you by Mr Frost's Secretary. Please read carefully as they include important information regarding your fasting, admission time, postoperative appointment and fees.

Medications: Thoroughly read the list of medications provided to you in your preoperative pack. This will give you instructions on cessation of medications preoperatively. If you are unsure please discuss it with Mr Frost.

Aids: You should arrange for the hire or purchase of elbow crutches from your local chemist or surgical appliance supplier and bring these with you to the hospital. You may also consider the rental of a Game Ready ice and compression machine which will help with swelling reduction following your surgery (details of the Game Ready are attached).

Physiotherapy: It is essential to engage in preoperative physiotherapy in order to improve your general strength and conditioning. Mr Frost will refer you for this. In some instances, physiotherapy alone may be adequate and if you feel your symptoms have completely resolved prior to your planned surgery please discuss this with Mr Frost.

YOUR HOSPITAL STAY

Admission: On most occasions you will be admitted on the day of your surgery and will meet with Mr Frost and your Anaesthetist prior to surgery. This will give you time to ask further questions.

Anaesthetic: Most patients will receive a general anaesthetic and a local anaesthetic "block". This will provide excellent pain relief in the initial postoperative period and will allow you to mobilise immediately following the procedure.

Immediately Postoperatively: You will be fitted with a splint following your surgery and prior to waking from your anaesthetic (provided at no cost by the hospital). You will then be taken to a ward specialising in postoperative surgical care. If you have decided to use the Game Ready ice machine this will be applied in the initial postoperative period and will assist with your pain and swelling control. You will have a pump attached to the calf opposite to the operation side and this will help maintain healthy circulation.

Review by Physiotherapist: You will be reviewed by the Physiotherapist at Hollywood Private Hospital on the day of your operation. They will help you mobilise and if you are safe doing so, you will be able to discharge the same day as your procedure.

Review by Mr Frost: Mr Frost will see you on the ward before your discharge from hospital.

Time in Hospital: The typical time in hospital following patellar stabilisation surgery is one day. If you have been admitted for afternoon surgery (ie. an 11am admission time) you may be required to stay overnight).

AFTER DISCHARGE FROM HOSPITAL

Mobility: Your postoperative restrictions will depend on the specific combination of procedures that were required to stabilise your knee cap.

- With Bony Surgery: If you have had bony surgery you will be required to use a splint for a period of 6 weeks. You will be allowed to weight bear during this time and perform gentle range of motion exercises.
- No Bony Surgery: If you have not had bony surgery you will only require a splint for a period of 2 weeks.

Aids: You will be required to use crutches for between 2 and 6 weeks.

- With Bony Surgery: A shower chair is recommended.

PREOPERATIVE & POSTOPERATIVE DETAILS

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AFTER DISCHARGE FROM HOSPITAL (continued)

Dressings: Your wound dressing is designed to remain intact until your first post-operative visit.

Pain relief: You should expect to require pain relief for approximately 5 to 10 days, thereafter your need for pain relief should be diminished. All required pain relief will be provided to you prior to discharge from the hospital. You may also be provided with medications to prevent constipation (a common side effect of pain relief medications).

Driving: You will be required to avoid driving for six weeks following your surgery. Even if you feel capable of driving, your reaction time will be slowed during this period.

Work:

- With Bony Surgery: It will typically take three months until return to full function. If you have a physical component to your job role then modifications to your work may be required for this period of time.
- No Bony Surgery: If you have an office based job you may feel able to return to work two weeks postoperatively. If you work involves a more physical component, six weeks leave is recommended.

Sport: Your return to sport plan should be discussed with Mr Frost prior to surgery as the specifics will depend on your progress with postoperative physiotherapy and the demands of your chosen sport.

- With Bony Surgery: It will be between 4 to 6 months postoperatively.
- No Bony Surgery: In general you should expect to return to sport approximately 3 months postoperatively.

Flying: Flying within six weeks of surgery has a higher risk of DVT (deep venous thrombosis) and is generally discouraged, although in certain circumstance this may be required. Please discuss any intention to fly with Mr Frost prior to your surgery.

1st Postoperative Appointment: Mr Frost will review you in his Nedlands rooms approximately two weeks postoperatively and review your surgical wound. In most cases a dissolving suture (stich) is used and will not require removal.

2nd Postoperative Appointment: Mr Frost will review you again (in Nedlands or Kalamunda) with an x-ray prior.

POSTOPERATIVE REHABILITATION & RETURN TO SPORT

Once your wound has healed hydrotherapy can be commenced.

- With Bony Surgery: You will be in a splint full time for 2 weeks and then a further 4 weeks when weight bearing. You will commence range of motion exercises with a Physiotherapist at 2 weeks.
- No Bony Surgery: You will be in a splint full time for 2 weeks and thereafter a Physiotherapist will help you regain range of motion and strength around the knee.

WHAT TO EXPECT

In general, although there may be ups and downs, your pain should decrease steadily from the time of surgery and by the 2 week postoperative mark you should be generally comfortable at rest. Your mobility should increase during this time. You will notice a significant amount of wasting of your quadriceps muscle (front of the thigh). Typically it takes approximately 3 months for this to improve and your knee will not return to normal until after that time.

QUESTIONS & CONCERNS

If at any stage you find your pain to be increasing, swelling in the leg markedly increasing despite an appropriate period of rest and elevation, redness or wound discharge please contact Mr Frost immediately.

Office Hours: Mr Frost's rooms (08) 9389 3800

After Hours: Hollywood Private Hospital switchboard (08) 9346 6000

NB: This is a guide only and should not be a replacement for the advice of Mr Frost or a medical professional.