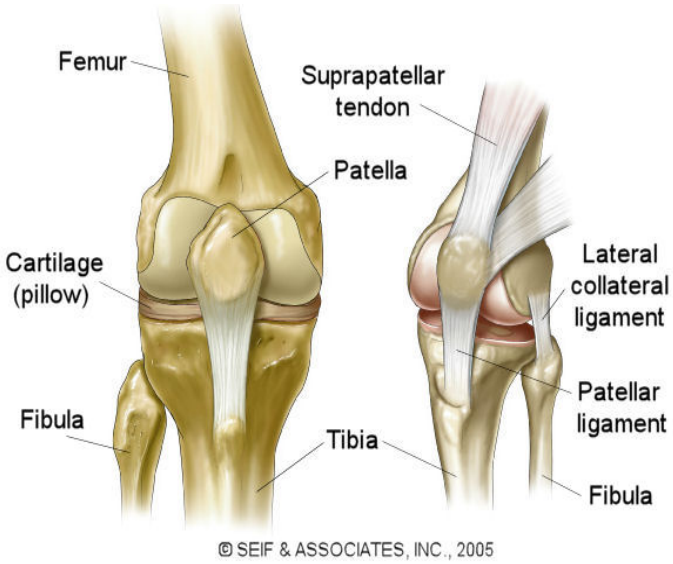
Recovery after Arthroscopy
(With Meniscus Injury)

You may have an internal derangement of the knee. This means something is wrong inside the knee. Your caregiver can make a more accurate *diagnosis* (learning what is wrong) by performing an arthroscopic procedure.



Your knee has two layers of cartilage. Articular cartilage covers the bone ends. It lets your knee bend and move smoothly. Two *menisci* (thick pads of cartilage that form a rim inside the joint) help absorb shock. They stabilize your knee. Ligaments bind the bones together. They support your knee joint. Muscles move the joint, help support your knee, and take stress off the joint itself.

ABOUT THE PROCEDURE

Arthroscopy is a surgical technique. It allows your orthopedic surgeon to diagnose and treat your knee injury with accuracy. The surgeon looks into your knee through a small scope. The scope is like a small (pencil-sized) telescope. Arthroscopy is less invasive than open knee surgery. You can expect a more rapid recovery. Following your caregiver's instructions will help you recover rapidly and completely. Use crutches, rest, elevate, ice, and do knee exercises as instructed. The length of recovery depends on various factors. These factors include type of injury, age, physical condition, medical conditions, and your determination. How long you will be away from your normal activities will depend on what kind of knee problem you have. It will also depend on how much tissue is damaged. Rebuilding your muscles after arthroscopy helps ensure a full recovery.

RECOVERY

Recovery after a meniscus injury depends on how much meniscus is damaged. It also depends on whether or not you have damaged other knee tissue. With small tears, your recovery may take a couple weeks. Larger tears will take longer. Meniscus injuries can usually be treated during arthroscopy. If your injury is on the inner edge of the meniscus, your surgeon may trim the meniscus back to a smooth rim. In other cases, your surgeon will try to repair a damaged meniscus with *sutures* (stitches). This may lengthen your rehabilitation. It may provide better long-term health by helping your knee retain its shock absorption abilities.

Use crutches, limit weight bearing, rest, elevate, apply ice, and exercise your knee as instructed. If a brace is applied, use as directed. The length of recovery depends on various factors including type of injury, age, physical condition, other medical conditions, and your determination. Your caregiver will help with instructions for rehabilitation of your knee.

HOME CARE INSTRUCTIONS

- Use crutches and knee exercises as instructed.
- Applying an ice pack to your operative site may help with discomfort. It may also keep the swelling down.
- Only take over-the-counter or prescription medicines for pain, discomfort, soreness *(inflammation*)or fever as directed by your caregiver. You may use these only **if your caregiver has not given medications that would interfere.**
- You may resume normal diet and activities as directed.

SEEK MEDICAL ATTENTION IF:

- There is increased bleeding (more than a small spot) from the wound.
- You notice redness, swelling, or increasing pain in the wound.
- Pus is coming from wound.
- An unexplained oral temperature above 102° F (38.9° C) develops, or as your caregiver suggests.
- You notice a foul smell coming from the wound or dressing.

SEEK IMMEDIATE MEDICAL ATTENTION IF YOU DEVELOP A RASH, HAVE DIFFICULTY BREATHING, OR HAVE ANY ALLERGIC PROBLEMS.

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