



Arthroscopy

Patient information Leaflet

May 2020

This leaflet aims to help you understand what an arthroscopy is and how we treat and care for children having this procedure.

WHAT IS AN ARTHROSCOPY?

Arthroscopy literally means “looking in to joints” using a telescopic instrument allowing inspection of a joint cavity to be performed. The most common joint to be arthroscoped is the knee joint, although increasingly shoulder arthroscopy occurs along with arthroscopy of the hip and ankle.

WHAT ARE THE BENEFITS OF HAVING AN ARTHROSCOPY?

An arthroscopy allows the surgeon to inspect the joint by making a small incision through which a telescopic instrument is passed, which is less than the size of a “Biro”, enabling a clear view. Removal of torn pieces of cartilage or fragments of bone, which have broken off, can be achieved by arthroscopic procedures. In recent years some specialists have used arthroscopy to look at the small joints of the feet and of the wrist. Arthroscopy has been particularly useful for sports injuries of the knee and in dealing with tears of the medial or lateral cartilages.

ARE THERE ANY RISKS INVOLVED IN HAVING AN ARTHROSCOPY?

Please be sure to ask any questions you may have during your child’s pre-operative assessment appointment or when you see your child’s consultant BEFORE their operation.

It is important you know about, and accept, any possible risks BEFORE you sign the consent form.

- Arthroscopy is a relatively risk free procedure.
- Infection is extremely rare.
- Rarely some patients may develop blood clots in the calf called a deep vein thrombosis (DVT). If this occurs your child will be given treatment to thin their blood.
- Some patients have a sore throat after the anaesthetic.

WHAT HAPPENS AFTER THE OPERATION?

- The nurse will monitor your child’s condition by checking their observations and for any signs of bleeding.
- Your child will be offered sips to drink and a light snack.
- We encourage all patients who have had a general anaesthetic to have a sleep to help them recover from the operation.
- You will be able to go home once you have recovered from the operation.

WHAT ARE THE ALTERNATIVES?

The surgeon will request an x-ray or in some cases an MR scan to determine the condition of the joint. This is not always conclusive and it is advisable to inspect the joint internally.

HOW LONG WILL MY CHILD BE IN HOSPITAL FOR?

Your child will come into hospital, have the operation and usually go home on the same day. Parents have open visiting times, and other relatives can visit between 13:00 and 20:00. Some children may need to stay in hospital overnight and a parent is able to stay overnight.

WHAT HAPPENS TO MY CHILD WHEN WE ARRIVE AT THE CHILDREN'S UNIT?

- A nurse will admit your child onto the unit check personal details and take their pulse, temperature, oxygen saturations and blood pressure. Please tell the nurse if they have any known allergies or take any medication. Please bring any medication with you on the day. Please ensure you also inform the nurse if they have any other medical conditions.
- You will be asked to sign a consent form if you haven't already done so in the pre-operative clinic. If your child is having a general anaesthetic, you will be given staving instructions before admission in their admission letter. Please do not allow your child to chew gum as this causes an increase in saliva.
- Your child will be given a hospital gown to wear. Please also bring slippers, dressing gown and any teddy bears/dolls/toys for comfort.
- A nurse will apply Ametop cream/EMLA ('Magic Cream') if required to numb the area where your child will be cannulated.
- A play specialist will also conduct a pre-operative talk with you and your child. They are involved in helping your child to understand the procedure and distracting your child in the anaesthetic room.

WHAT HAPPENS AFTER MY CHILD'S OPERATION?

After the operation, your child will be taken to the recovery room and you will be able to accompany them back to the ward when they are awake. A nurse will check your child's observation. The nurse will monitor your child's pain, and give pain medication if required. Your child may feel sleepy after a general anaesthetic. They will have a cannula in-situ which will be removed prior to discharge. Your child will be offered sips of water, and then light diet when they are ready. Sometimes you need to be seen by a physiotherapist before your child goes home. Your nurse will tell you after the operation if your child needs to be seen by a physiotherapist. Once your child has recovered, and the medical and nursing team agree your child is well, you can go home.

GOING HOME

- Please ensure you have paracetamol and ibuprofen at home for your child before your appointment. Give pain relief as needed once discharged home. Do not give more than advised on the label.
- You should stay with your child for at least 24 hours following their surgery.
- If a follow-up appointment is needed, a letter will be sent to you with the appointment details. If any stitches need to be removed, an appointment will also be made for this. After two days the large crepe bandage can be removed but you must keep the operation sites covered for two weeks, normal water proof plasters are usually sufficient. Often at this time your child will be able to walk relatively normally and bend their knee at least to a right angle.
- If you are worried about your child's condition, please contact your GP or if necessary attend the Accident & Emergency Department.

WHEN WILL MY CHILD BE ABLE TO RETURN TO SCHOOL?

Your child will need 2 weeks off school. Depending on the extent of their surgery your child will be able to return to normal activities including sport after three to four weeks.

WHO SHOULD I CONTACT IF THERE IS A PROBLEM FOLLOWING MY CHILD'S SURGERY?

- Children's Unit 0161 922 5252 (24 hrs)
- NHS Direct 111 (24hr helpline)
- You can also contact your GP for advice.

Useful Websites/information:

- Department of Health (www.dh.gov.uk)
- NHS Choices (www.nhs.uk/conditions)
- NHS institute for innovation and improvement (www.institute.nhs.uk)
- NHS Improvement (www.improvement.nhs.uk)

If you have any questions you want to ask, you can use this space below to remind you

If you have a visual impairment this leaflet can be made available in bigger print or on audiotape. If you require either of these options please contact the Patient Information Centre on 0161 922 5332

If you require an interpreter, please ask an appropriate person to contact our central booking office between Monday to Friday 8am to 5pm on 0161 922 6991 to arrange this for you.

語言翻譯及病者支持服務 (LIPS):

如果閣下需要翻譯員在您的預約當日幫助您的話 請找一名合適的家庭成員 0161 922 6991 聯絡本中央預約辦事處來您您安排 我們的辦公時間是星期一至星期五 上午 8 時至下午 5 時

Językowo Tłumaczeniowa Usługa Pomocy dla Pacjenta (Language, Interpretation and Patient Support Service LIPS):

Jeśli potrzebujesz pomocy tłumacza w trakcie swojej wizyty, proszę poprosić odpowiedniego członka rodziny o skontaktowanie się z Centralnym Biurem Zamówień (Central Booking Office), w celu zorganizowania tłumacza pomiędzy poniedziałkiem a piątkiem w godzinach od 08:00 - 17:00 pod numerem 0161 922 6991.

لینگوئج، انٹرپریٹیشن اینڈ پیسینٹ سپورٹ سروس (Lips)

اگر آپ کو اپنی اپائنٹمنٹ کے لئے مترجم کی مدد کی ضرورت ہو تو براہ مہربانی اپنے خاندان کے کسی موزوں فرد سے کہیں کہ وہ ہمارے سنٹرل بنگ آفس سے پیر سے جمعہ 8.00 بجے صبح سے 5.00 بجے شام کے دوران 0161 922 6991 پر فون کر کے اس کا بندوبست کریں۔

Adapted from Tameside Hospital Arthroscopy patient information leaflet for adults.

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