



Preparing for a knee arthroscopy

What is an arthroscopy?

A knee arthroscopy is a type of keyhole surgery. Your surgeon will put a narrow telescope through a small cut in your skin to look inside your knee joint. Some procedures require several small cuts in order to pass the instruments through the knee.

What type of anaesthetic will I have?

There are two main types of anaesthetic given for this type of surgery:

- **General anaesthetic** – anaesthetic drugs make you unconscious, so you are completely unaware throughout your operation
- **Spinal anaesthetic** – the lower half of your body is numbed by an injection in your lower back. You may also be offered some sedation (medicine to relax you).

Most knee arthroscopies are performed under a general anaesthetic.

The anaesthetist will discuss with you the best options for you based on your health, age and type of surgery required.

How long will I be in hospital for?

You should be able to go home the same day.

Before the operation

- Consider what you can do to improve your health before the operation. Stopping smoking, reducing alcohol consumption, eating more healthily and exercising have all been shown to help patients recover more quickly after surgery. Ask your GP practice about lifestyle support available to you.
- If you have existing medical conditions (eg diabetes, high blood pressure, chest or heart disease) check with your GP well ahead of your surgery that your medication is up to date and as effective as it can be. This can help prevent delays to your surgery and give you the best chance of your operation and recovery going well.
- You should take your normal medication to the hospital with you. The staff will advise you on how to take it on the day of the operation.
- Remember to wear any hearing aids and take some spare batteries.



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- It is normal to feel anxious about an operation. To help you relax before and after your surgery think about bringing some headphones and music with you, or something to read. Consider learning some breathing exercises or relaxation techniques.
- On the morning of surgery (or the previous evening), you should have a bath or shower, as this can help to reduce the risk of infection. 
- The hospital will advise you on when to stop drinking and eating (the day of the operation). If you drink plenty of water before this time, you will certainly feel better and may even reduce complications.
- Make sure you have some over-the-counter painkillers available at home. The hospital will advise you on how to take these.
- You should arrange for an able-bodied adult to take you home and be with you the first night at home after surgery if possible. If you have others you care for, you should arrange appropriate help for them too. 
- It may be difficult for you to climb stairs afterwards and you may require crutches to walk. Depending on the layout of your home, it might help to move furniture and think where best to sleep.
- It might help to plan some easy-to-prepare meals for when you come home.
- You won't be able to drive for at least a few weeks, so you may need to make arrangements with family and friends to help you get around when you come home. 

After the operation

- You may feel drowsy and tired initially while your body recovers.
- You may have some swelling and discomfort around your knee for several days. The surgeon will place some local anaesthetic into your knee at the end of the surgery to help with this. The hospital will advise you on painkillers to take as the effect of the local anaesthetic wears off.
- A physiotherapist or nurse will give you advice about exercises that you can do at home to help your recovery.

Research has shown that on the first day after having a knee arthroscopy:*



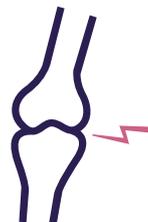
2 in 3

patients reported
feeling drowsy



7 in 10

patients reported
feeling thirsty



nearly half
of patients had
moderate pain



only 8 per cent
of patients had
severe pain

*Walker EMK et al. Patient reported outcome of adult perioperative anaesthesia in the United Kingdom: a cross-sectional observational study. *Br J Anaesth* 2016;**117**:758–766.

Recovering at home

- You should try and keep any dressings as clean and dry as possible. If the dressings are not waterproof you should cover them with a plastic bag when washing.
- If you have non-dissolvable stitches or staples you will need to make an appointment with a nurse at your GP surgery to have them removed after a week or two.
- You should take regular pain relief as advised by your hospital.
- You should do any exercises that you have been given to help stop your knee from becoming stiff or weak. You will gradually be able to be more active.
- To reduce the risk of deep vein thrombosis (blood clot) wear the support stockings until you are back to normal activity.
- Most people will need to take a week or two off work. The hospital will give you a fit (sick) note to cover you for this period – check you have this before you leave hospital. If you have a more active job you may need longer to reduce the risk of damaging your knee.
- You can start driving again once you can do so comfortably and you can safely perform an emergency stop. How long this takes will vary from person to person and depends on the surgery you had. The surgeon will be able to advise you. You should let your insurance company know before you start driving again.

Things to look out for at home

You should contact your GP or the hospital where you had your surgery if:

- you have severe pain or your pain increases
- your wound becomes red, swollen or feels hot to the touch
- you notice fluid or a discharge leaking from your wound
- you feel unwell with a fever over 38°C or vomiting
- you notice numbness or tingling around your knee.

These symptoms may occur if you have developed an infection and may need further treatment, usually with antibiotics.

If you feel very unwell you should go to your nearest accident and emergency department as soon as possible.



Additional resources available online

Royal College of Anaesthetists

- Preparing for surgery: Fitter Better Sooner toolkit and animation (rcoa.ac.uk/fitterbettersooner)
- You and your anaesthetic and Your spinal anaesthetic (rcoa.ac.uk/patientinfo/leaflets-video-resources)
- Caring for someone who has had a general anaesthetic or sedation (rcoa.ac.uk/patientinfo/sedation)
- Risks associated with your anaesthetic (rcoa.ac.uk/patientinfo/risks)
- Patient information series (rcoa.ac.uk/patientinfo/leaflets-video-resources)

Royal College of Surgeons of England

- Recovery tracker (<http://bit.ly/2LDtPqa>)
- Knee surgery – arthroscopic meniscectomy (<http://bit.ly/2mJ27Kll>)

NHS Choices

- Arthroscopy ([nhs.uk/conditions/arthroscopy](https://www.nhs.uk/conditions/arthroscopy))

Disclaimer

We try very hard to keep the information in this leaflet accurate and up-to-date, but we cannot guarantee this. We don't expect this general information to cover all the questions you might have or to deal with everything that might be important to you. You should discuss your choices and any worries you have with your medical team, using this leaflet as a guide. This leaflet on its own should not be treated as advice. It cannot be used for any commercial or business purpose.

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Tell us what you think

We welcome suggestions to improve this leaflet.

If you have any comments that you would like to make, please email them to:

patientinformation@rcoa.ac.uk

This leaflet has been reviewed by the RCoA Patient Information Group (which includes lay members) and by the RCoA Professional Standards Advisory Group.

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