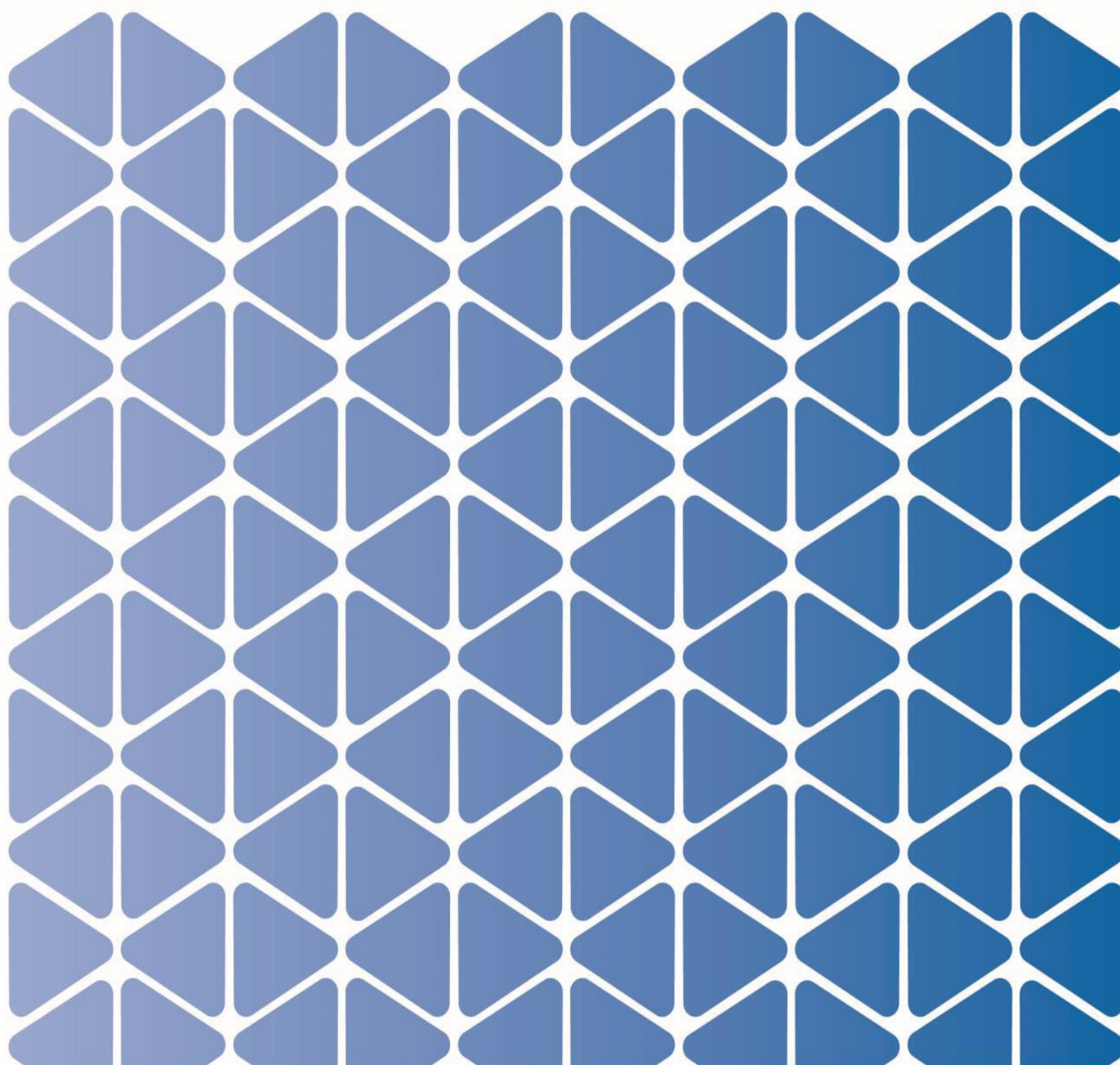


PATIENT INFORMATION

ADVICE & EXERCISES FOLLOWING MICROFRACTURE OF THE KNEE



Following your microfracture of the knee surgery it is important that you participate fully in your rehabilitation to ensure the best outcome. Your advice and exercises will vary depending on who your consultant is, their preferred surgical technique and also on the size and location of the microfracture procedure.

For the first six weeks after your surgery, the new cartilage being formed needs to be protected. In most cases, this will result in restrictions on how much weight you can take through your leg. Your physiotherapist will advise you on the specific details of your post-operative instructions and these will be marked off in the sections below. **Do not carry out any exercises or advice which has not been marked off unless advised otherwise by your consultant or physiotherapist.**

Swelling management

Your knee will swell after the operation. To help reduce this you should:

- ❖ Keep your leg elevated (ankle higher than hip) when you are resting.
- ❖ Do not walk long distances (i.e. no longer than 15 minutes at a time) for the first week after your surgery.

Once you have removed your outer bandage you should apply 'cold' to your knee. Cover your knee with cling film or a plastic bag and place a large bag of frozen peas or crushed ice, wrapped in a damp towel, around your knee for 15 minutes.

You must remember to use the towel and plastic cover to prevent ice burns and protect the wounds. Try to do this 3 times each day, but never exceed 15 minutes at a time.

Resting positions

When resting after doing your exercises or walking with your crutches, you should rest with your knee straight. Try and support your whole leg to prevent excessive pain behind your knee.

Pain relief

You will usually be given painkillers to take home after your operation. It is important to take these as advised. It is normal to have some discomfort for several weeks after your surgery but taking your painkillers regularly for the first few days will make you feel more comfortable.

Out-patient Physiotherapy follow up

Your physiotherapy out-patient appointment will be arranged for you at your local hospital. Your physiotherapist will guide you through the stages of rehabilitation and progress your exercises. Your rehabilitation can take up to 6 - 12 months in total depending on the level of function you are working towards. Return to work, exercise, sport and normal function should be guided by your clinician / physiotherapist.

Post-operative advice

Physiotherapist – please fill out information as appropriate below and tick relevant boxes.

Mobility

Full weight bearing

You will be allowed to take full weight through your operated leg as pain allows however you should use crutches for around 1-2 weeks to help prevent you from developing any unusual walking patterns.

Partial weight bearing

You will be required to be partial weight bearing for the first _____ weeks following surgery to protect the region of microfracture. You will only be allowed to put approximately 50% of your weight through your operated leg and you will need to use crutches in order to do this safely. Your physiotherapist will teach you how to walk with crutches and go up and down stairs partial weight bearing.

Non weight bearing

You will be required to be non-weight bearing for the first _____ weeks following surgery to protect the region of microfracture. This means you cannot put any weight onto the operated leg and you will need to use crutches in order to do this safely. Your physiotherapist will teach you how to walk with crutches and go up and down stairs non weight bearing.

Brace

You do not require a knee brace.

You are required to wear a knee brace for _____ weeks.

Range of movement allowed:

(Your brace will be set to these limits)

Your physiotherapist will show you how to put your brace on and off. It must be worn all the time, including overnight but can be removed temporarily for washing so long as you do not move your knee further than the brace would allow. You should wear the brace directly on your leg as wearing it on top of clothes will affect the support the brace will provide to your knee. You should also check your skin at least daily for any signs of rubbing.




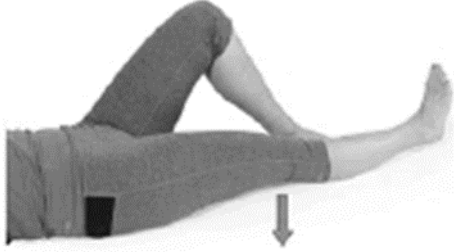




Exercises




Please only complete the exercises that have been ticked by your physiotherapist. **If you are required to wear a knee brace, you must wear it for all exercises ticked below. Do not force your knee to move past the limits of the brace.**

The exercises should be started on the day of your operation, even when the bandage is still in place. You should do your exercises at least 3 times per day.






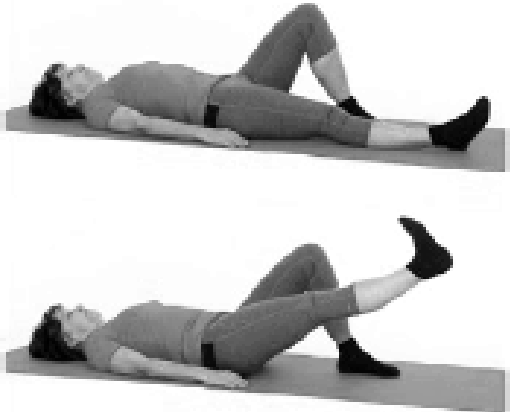
REMEMBER EXERCISES SHOULD BE PAIN FREE.

<input type="checkbox"/>		<p>Circulation exercises Sitting or lying on your back. Move your ankles up and down 10 times, every waking hour to help the circulation in your legs.</p>
<input type="checkbox"/>		<p>Passive knee extension Sitting on a chair with the operated leg elevated on another chair / stool in front of you. Let your leg relax and straighten in this position. Hold 30 seconds and repeat 3 times.</p>

		<p>Active knee extension Lie on your back with one knee bent and your operated knee straight.</p> <p>Pull your toes on the straight leg up towards you and press the back of your knee into the bed/floor (as appropriate) using your front thigh muscles.</p> <p>Hold for 10 seconds then relax. Repeat 10 times.</p>
		<p>Passive knee flexion Perform <i>instead</i> of passive knee flexion (sitting) if more comfortable, do not do both.</p> <p>In long sitting, place a towel or belt around the heel of your operated leg.</p> <p>Gently pull the knee upwards until a stretch is felt, then lower the leg back to straight.</p> <p>Repeat 500 times, 3 times per day.</p>
		<p>Passive knee flexion (sitting) Perform <i>instead</i> of Passive knee flexion if more comfortable, do not do both.</p> <p>Sitting on a chair. Hook your good leg in front of your operated leg.</p> <p>Use your good leg, with or without the help of your hands lifting your thigh, to bend your operated knee until a stretch is felt, the slide back out with your good leg.</p> <p>Repeat 500 times, 3 times per day.</p>

<input data-bbox="92 120 201 219" type="checkbox"/>		<p>Patella (kneecap) glides 1</p> <p>Sit with your leg straight and supported, let all the muscles relax.</p> <p>With your hand on the upper border of the kneecap, gently push your kneecap towards your foot.</p> <p>Hold 5 seconds, repeat 10 times.</p>
<input data-bbox="92 696 201 795" type="checkbox"/>		<p>Patella (kneecap) glides 2</p> <p>Sit with your leg straight and supported, let all the muscles relax.</p> <p>With the border of your thumb, gently push your kneecap towards the opposite leg.</p> <p>Hold 5 seconds, repeat 10 times.</p>
<input data-bbox="92 1395 201 1494" type="checkbox"/>		<p>Patella (kneecap) glides 3</p> <p>Sit with your leg straight and supported, let all the muscles relax.</p> <p>With the border of your thumb, gently push your kneecap outwards.</p> <p>Hold 5 seconds, repeat 10 times.</p>

Start the next 3 exercises after you have been advised by the out-patient physiotherapist.

		<p>Side lying hip abduction</p> <p>Lie on your un-operated side.</p> <p>Keeping your operated (top) leg as straight as possible, lift it up towards the ceiling. Gently lower back down.</p> <p>Make sure your leg stays in line with your body and your toes point forward.</p> <p>Repeat 10 times.</p>
		<p>Prone lying hip extension</p> <p>Lying on your tummy.</p> <p>Keeping your operated knee straight, lift the whole leg towards the ceiling. Gently lower back down,</p> <p>Repeat 10 times.</p>
		<p>Straight leg raise</p> <p>Lie on your back with your operated leg straight and other leg bent.</p> <p>Flex your toes towards you and then keeping your knee straight; lift the operated leg a few centimetres up. Hold for 5 seconds and slowly lower down.</p> <p>Repeat 10 times.</p>

Queries

If you:

- ❖ Have any queries about any of the advice contained in this booklet;
- ❖ Are unable to carry out your exercises in accordance with this booklet; or
- ❖ Have persistent pain or swelling, or worsening of your symptoms

Please contact the Physiotherapy Department at the hospital where you had your surgery between 8:30am and 4:30pm Monday to Friday on the direct dial numbers below:

Worcestershire Royal Hospital

01905 760622 / 760187

Alexandra Hospital

01527 512114

Kidderminster Hospital and Treatment Centre

01562 513066

If you are concerned about your knee you can also contact A+E or your own GP.

Feedback for Inpatient Therapies

Please scan the QR code or follow the link below:

If you have been seen by a Physiotherapist or Occupational Therapist during your admission, please leave us some feedback by scanning the QR code or following the link and filling in the short survey.



<https://apps.worcsacute.nhs.uk/PublicSurvey/AHPFeedback>

Ward admitted to: _____

Therapy team who treated you: _____

If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.

Patient Experience

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

Feedback

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

Patient Advice and Liaison Service (PALS)

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

How to contact PALS:

Telephone Patient Services: 0300 123 1732 or via email at: wah-tr.PALS@nhs.net

Opening times:

The PALS telephone lines are open Monday to Friday from 8.30am to 4.00pm. Please be aware that you may need to leave a voicemail message, but we aim to return your call within one working day.

If you are unable to understand this leaflet, please communicate with a member of staff.