

Knee Arthroscopy

What to expect



Medical Information Guide

Knee Arthroscopy

This guide provides information for Medibank Private members and their families about knee arthroscopy.

It is important that you are well prepared for your healthcare experience, and know what to expect at key stages prior to, during and following this procedure.

It is also important that you discuss your particular circumstances in detail with the healthcare professionals who will be treating and caring for you. You should be confident in the treatment choices you make with your healthcare team and ensure that they are aware of your individual needs.

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As a member of Medibank Private, your entitlement to Benefits will depend on your type (hospital and/or extras) and level of cover and is subject to our Fund Rules and Policies. Premium rates, Benefits and the Fund Rules and Policies are subject to change from time to time. A copy of our Fund Rules is available at our Retail Centres or at medibank.com.au

Call us on 13 23 31 before you go to hospital to find out what you're covered for, any likely additional costs you may have to pay as well as for any other advice you may need.

The information provided in this guide is current at the time of issue, July 2008.

What is a knee arthroscopy?

Knee arthroscopy is an examination of the inside of the knee joint by inserting a fibreoptic telescope (arthroscope) through a small incision. The arthroscope is a small soft tube with a light and camera attached. Fluid is inserted into the knee to create more space and images of the joint interior are sent to a video screen. Your surgeon is able to see the inside of your knee in minute detail. If necessary, any damaged tissue can be removed using other instruments inserted through additional small incisions.

Why is knee arthroscopy performed?

Knee arthroscopy is used to diagnose and treat a range of conditions which can be associated with persistent pain, swelling, catching or giving away, including:

- torn cartilage
- damaged joint lining
- torn ligament
- damage to the kneecap (patella)
- arthritis

Referral to a specialist

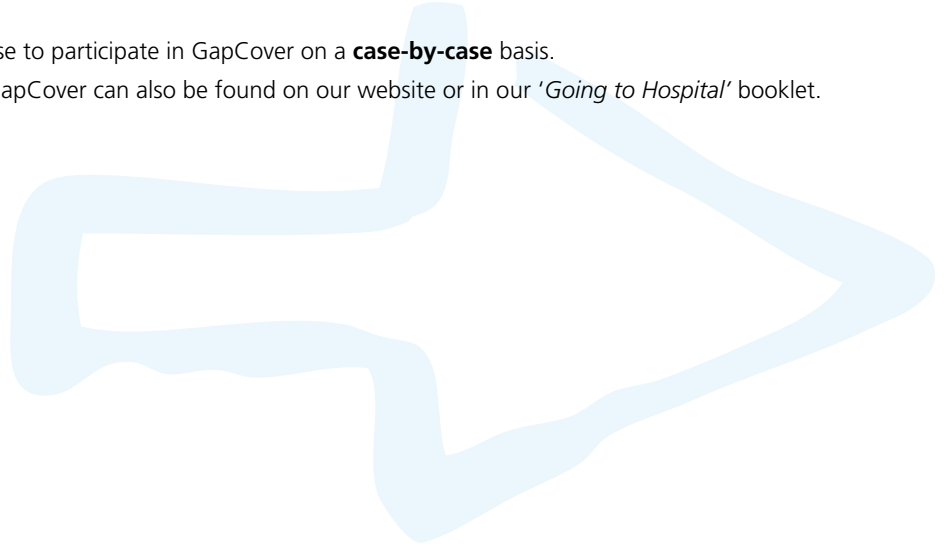
Knee arthroscopy is a specialised procedure usually performed by an orthopaedic surgeon. Your GP can recommend and refer you to a suitable specialist.

As well as advice from your GP, you may wish to know more about the procedure and what you can expect from your specialist. The following website provides further information about knee arthroscopy: **www.aoa.org.au** Australian Orthopaedic Association.

Cost of treatment may also be an important consideration when selecting a specialist. A list of orthopaedic surgeons who have participated in Medibank Private's GapCover Scheme in the past can be found on our website **medibank.com.au**

Note: Specialists can choose to participate in GapCover on a **case-by-case** basis.

More information about GapCover can also be found on our website or in our '*Going to Hospital*' booklet.



What should I discuss with my doctor or specialist?

- discuss the treatment options for your condition and why knee arthroscopy is being recommended
- what are the possible outcomes for each of the options you have discussed
- what is the likelihood of each of these outcomes occurring
- why your doctor has recommended a particular specialist in your case
- what experience does the specialist have, for example number of knee arthroscopies performed and outcomes for patients, including complication rates
- possible risks and outcomes associated with the procedure
- when any pathology results will be known
- typical recovery time
- arrangements for getting home and after care
- possible further treatment

Ideally, you should make sure that you fully understand the procedure that is going to be performed. Your specialist should explain in detail how the procedure is done, and what preparation you should make. Your doctor may provide you with written material to read at home.

Your Medibank Private *'Going to Hospital'* booklet contains further questions that you may wish to ask your doctor, including information on obtaining informed financial consent.

Where is it done?

Knee arthroscopy is usually carried out in a day surgery or day facility within a hospital. However in some circumstances an arthroscopy performed in hospital may require an overnight admission.

How long will it take?

Time required for the procedure will vary with individual circumstances, but typically takes between 30 minutes and two hours, with a few hours recovery time following the procedure.

Who is involved?

Healthcare professionals usually involved in the procedure are:

- your orthopaedic surgeon
- an anaesthetist will administer sedative medication and a general anaesthetic
- radiologist for any necessary x-rays
- pathologist for any necessary blood tests
- specialised nurses will assist with the procedure and your recovery

How to prepare for the procedure?

Your specialist should provide detailed advice on the preparation required in your particular case, but in general:

- you will need to fast (have nothing to eat or drink) for six hours prior to the procedure
- you should obtain medical advice about taking prescribed medications prior to the procedure

What happens on arrival at the day surgery or hospital?

When you arrive at the day surgery or hospital, you will be admitted. Necessary paperwork will need to be completed.

Prior to the procedure your specialist will ask you to sign a consent form, indicating that you give him or her permission to perform the procedure and that you understand all potential risks and complications.

What to expect during a knee arthroscopy

Following admission, you will be taken to the procedure room and prepared for the procedure. An anaesthetist may see you during this time. Preparation may include a sedative injection to make you drowsy. While arthroscopy usually involves a general anaesthetic, in some circumstances a regional or local anaesthetic is used.

When the anaesthetic has taken effect, your surgeon will first make a small incision to pass the arthroscope through the skin and into the joint. The arthroscope projects images of the inside of your knee onto a video screen to guide your surgeon as the instrument is rotated inside your knee. Another small incision is made on the other side of the knee to enable examination of all compartments. If problems are detected, the surgeon may make further small incisions to insert instruments to remove damaged tissue. Most incisions are less than a centimeter in length.

When surgery is finished and the arthroscope removed, small band-aids are placed over the holes, or the surgeon may stitch them with sutures. Padding and a bandage is placed over the area to support the knee and protect from infection.

What happens after a knee arthroscopy?

After a knee arthroscopy you will be monitored in the recovery area prior to going home. Before you leave, a physiotherapist should see you and show you exercises to do at home, and your surgeon may see you to explain what was done in surgery and any findings.

You should arrange for a friend or relative to accompany you when discharged, as you should not drive yourself home.

The day surgery or hospital should give you specific instructions about your ongoing treatment, any side effects you may experience once home and any symptoms for which further assistance should be sought.



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The information contained in this guide is current at the time of issue, July 2008, and supersedes all previously published material.
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