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Surgical consent for knee arthroscopy including partial meniscectomy and/or chondroplasty

All surgical procedures are associated with certain risks such as pain, bleeding, infection, scarring, damage to blood vessels or nerves, anesthetic-related complications, thromboembolic complications, and medical complications (such as heart attack, stroke, or death).

- **Pain:** In an effort to decrease pain you will be adequately anesthetized during surgery and will receive pain medications post-operatively.
- **Bleeding:** Given the fact that this is minimally invasive arthroscopic surgery, the risk of bleeding is minimal.
- **Infection:** The risk of infection is approximately 1%. You will receive antibiotics through your IV during surgery. In addition the surgery will be performed under sterile conditions. As a result post-operative antibiotics not routinely administered.
- **Thromboembolic complications:** Anytime surgery is performed on the lower extremities there is a theoretical risk of developing a blood clot in the legs or the lungs. This risk is approximately 1 in 10,000 cases in routine knee arthroscopy. As a result, the routine use of blood thinners following surgery is not routinely recommended because the risk of developing complications related to thinned blood and excessive bleeding and swelling outweighs the potential benefit of preventing a blood clot. If, however, you have a personal or family history of a blood clot or a clotting disorder, blood thinning medications are recommended; please be sure to discuss this with your surgeon. The use of compression stockings following surgery will help decrease your risk of developing a blood clot. In addition performing exercises, such as foot pumps, will also decrease the risk of developing a blood clot. Finally routine walking (but not excessive walking) after surgery will also help decrease your risk for developing a blood clot. If, however, you develop calf pain, chest pain, or shortness of breath after your surgery, please notify your surgeon immediately or proceed to the emergency department for further evaluation as these are symptoms sometime associated with the development of a blood clot.

Potential complications more unique to knee arthroscopic surgical procedures include the following:

- Chondral injury: It is possible that during the procedure, the articular cartilage covering the surface of the bones maybe inadvertently damaged by the surgical instruments.
- Further meniscal tearing: If a partial meniscectomy is performed, it is still possible that in the future you may develop additional or further meniscal tearing despite a well-done procedure.
- Subsequent arthritis: The meniscus acts as a shock absorber preventing arthritis. If a portion of the meniscus must be trimmed out, it is possible that this will increase the risk for developing arthritis in this part of her knee in the future. In addition if a chondroplasty is used to remove some damaged articular cartilage then, by definition, there is already some element of arthritis in the knee; this may progress with time.
- Stiffness: Stiffness is one of the most common complications following arthroscopic procedures of the knee. In order to prevent stiffness it is important to perform routine walking activities and to follow the post-operative instructions including knee bends. In addition physical therapy will be prescribed after your first post-operative visit. Attending routine physical therapy sessions and performing a home exercise program on days that you are not in therapy will significantly decrease the risk for developing post-operative stiffness.
- Failure to alleviate pain: It is theoretically possible that the surgery, although technically performed successfully, may not completely alleviate all of your symptoms. This scenario is most commonly encountered if there is arthritis noted at the time of surgery. Although arthroscopy is very effective in treating symptoms related to meniscal tears or localized chondral defects, arthroscopy is not successful in alleviating pain related to knee arthritis.

Please print and sign your name below if you have read the information listed above and would like to proceed with surgery.

Patient Signature: _____ Date: _____

Printed Patient Name: _____