

Further information can be obtained from:

NHS 111	Dial111
Or contact your GP	
Bluebell Ward, Lister Hospital, Stevenage	01438 284008
Children's Day Services	01438 286315
Children's Emergency Department, Lister Hospital, Stevenage	01438 284333
Patient Advice and Liaison Service	01438 285811

Reference

The information in this leaflet was taken from Cambridge University Hospitals NHS Trust, American Academy of Orthopaedic Surgeons, www.nhs.uk and www.patient.co.uk

www.enherts-tr.nhs.uk

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You can request this information in a different format or another language.

Arthroscopy

Child Health Patient Information Leaflet



Your child has been admitted to the Day Surgery Unit for a procedure called an arthroscopy.

What is an arthroscopy?

This is a type of keyhole surgery used both to diagnose and treat problems with joints.

During the procedure, your orthopaedic surgeon inserts the arthroscope (a small camera instrument about the size of a pencil) into a small incision next to the affected joint. The arthroscope sends the image to a television monitor. On the monitor, your surgeon can see the structures of the joint in great detail and, if necessary, repair or remove damaged tissue. To do this, small surgical instruments are inserted through other incisions around the joint.

Complications

Complications following an arthroscopy are rare but can include:

- Infection in the affected joint causing fever, pain and swelling.
- Bleeding in the affected joint causing pain and swelling.
- Accidental damage to the nerves near the joint which can lead to numbness and

possible loss of sensation.

What to Expect in Hospital

Your child's operation will take place as a day case under a general anaesthetic. You and your child will be seen by an anaesthetist (the doctor who puts your child to sleep) and your surgeon prior to the operation. They will check that your child is well and confirm that the operation is still necessary. You will be asked to sign a "Consent for Treatment" form where the risks and benefits of the operation will be fully explained.

After the Operation

Following the operation it is likely that your child will feel tired and possibly tearful. This is due to the anaesthetic. They may have a drink shortly after returning to the ward and will then be encouraged to sleep.

The nurse looking after you will be assessing your child regularly and will let you know when it is safe for them to eat. There should be very little discomfort but if your child experiences any pain, please tell the nurse looking after you and painkillers will be given.

The nurses looking after you will

also be regularly assessing the site of the operation for any excessive bleeding or change in circulation to the affected limb.

CARE AT HOME

Wound Care

The site of the operation will be covered with a small dressing. Depending on the dressing type, the nurse/surgeon will advise you when to remove it and when normal bathing can be resumed. Your child's wound site should be observed for signs of infection i.e. excessive swelling, redness around the plaster or dressing, pain or discharge. If your child develops a high temperature with any of these signs they should be checked by your GP or Children's Emergency Department. If your child complains of numbness or tingling to the affected joint they should be checked by your GP.

Pain Relief

Regular pain relief is advised for 2-3 days. Paracetamol (Calpol) can be given every 4-6 hours up to four times a day and Ibuprofen (Nurofen) every 6-8 hours up to three times a day. Please read the label for the correct dose for your child according to their age. Ice packs can help to relieve discomfort and reduce swelling. Please encourage your child to keep the affected limb elevated

while resting.

Last Paracetamol given _____

Last Ibuprofen given _____

Eating and Drinking

Your child may eat and drink normally.

Nausea and Vomiting

Do not worry if your child feels sick or vomits once or twice after leaving hospital. The anaesthetic can cause this and it is not an uncommon side effect. If this occurs stop giving food for about an hour and try small amounts of water or diluted juice every 20 minutes then a light diet such as plain biscuits or toast. If your child continues to vomit please call for advice or go to your nearest A&E.

Activity

Due to the anaesthetic your child must rest for 24-48 hours with adult supervision. They should be able to return to school after a week. Your surgeon will advise you as to when your child may participate in sport and PE.

Follow-Up

You may be asked to attend a follow-up appointment four to six weeks after the operation. This appointment will be sent to you by post.