

THE RYU HURVITZ ORTHOPAEDIC CLINIC

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Lateral Retinacular Release

Arthroscopic lateral Retinacular release is usually performed in individuals with a mal-aligned and painful patella (kneecap). This procedure helps to correct the poor tracking of the kneecap by re-centering the kneecap. This operation is performed on an outpatient basis and patients are able to return home the day of surgery. Early range of motion in the postoperative period is recommended to help keep the patella realigned. It is common for patients who have undergone this procedure to have pain postoperatively. Analgesic pain medication prescribed can help the patient comfortably initiate motion. You may need crutches initially for 2-3 days however full weight bearing is allowed immediately. A heel-toe gait is encouraged. A large bulky dressing will be applied following surgery and is worn for the first 24 hours. Please wear baggy or loose clothing to fit over the dressing which is changed on the first postoperative day by the physician.

EXERCISES

The large thigh muscle (quadriceps) rapidly shrinks in size and strength after surgery. The following exercises can help prevent this and can be performed in a sitting or supine position.

- 1) Straighten your knee as much as possible, tighten the thigh muscle for 5 seconds, then relax, then tighten, etc. This should be done 10-20 times each hour. Although the knee may ache when you perform these exercises, you will not harm your knee if performed with your knee fully extended (straight).
- 2) Begin bending your knee back as far as possible based on your comfort. Your knee will feel somewhat stiff and tight but early gentle bending is important and safe.
- 3) You may use ice on your knee (keeping the dressing dry) as often as is comfortable for 15-20 minutes at a time. Ice helps minimize inflammation and pain.

WOUND CARE

Your bulky compression dressing will be changed within 24 hours after surgery in the office by your physician. After an additional 48 hours, the new dressing may be removed and the puncture wounds covered with band-aids. The knee is rewrapped with an Ace bandage beginning at the mid-calf and wrapping it to above the knee.

The Ace wrap should be worn continuously if swelling is present. Do not wrap the elastic bandage too tightly or it will make your foot and ankle swell. Some bloody drainage from the wounds soiling the dressing is common and will continue for 2-3 days following surgery. The puncture wounds should be kept dry until all drainage has stopped.

RETURN APPOINTMENT

Your knee will be re-examined in approximately 24 hours following surgery and then again in 5-7 days. This appointment will be arranged before you leave the outpatient facility. If you lose your appointment card, please call the office at (805)963-2729. Physical therapy will be initiated by your physician.

COMPLICATIONS

Complications following this type of knee surgery can occur. If you develop a persistent fever, calf pain, significant calf or ankle swelling, or persistent bloody or purulent drainage, please contact the office immediately.