University Hospitals Coventry and Warwickshire NHS Trust

Department of Trauma and Orthopaedics.
UHCW NHS Trust

PROCEDURE INFORMATION SHEET

KNEE REPLACEMENT
(Knee arthroplasty – partial or total)

Name:

AFFIX PATIENT LABEL

Date of birth:

Hospital No:

INTENDED PROCEDURE AND SIDE
(to be completed by surgeon)

OPERATION (identify):

Partial or Total Knee Replacement

……

SIDE: RIGHT LEFT BOTH

PROCEDURE

Knee replacement involves inserting a metal and plastic artificial joint, effectively re-lining the worn joint surfaces. The procedure involves an incision over the front of the knee and the implants are attached to the thighbone (femur) and the shinbone (tibia). Further detail is contained in a UHCW NHS Trust Information Booklet.

INTENDED BENEFITS

Improvement in symptoms of pain, restricted mobility and stiffness related to osteoarthritis.

ANAESTHETIC

Information about the anaesthetic and the risks involved will be provided separately. If you have any concerns, talk these over with your anaesthetist.

GENERAL RISKS OF ANY OPERATION

They include:

- Small areas of the lungs may collapse, increasing the risk of chest infection. This may need antibiotics and physiotherapy.
- Clots in the legs (DVT) causing pain and swelling. Rarely part of this clot may break off and go to the lungs which can be fatal (pulmonary embolus).
- Serious medical problems – it is very rare, but occasionally patients suffer severe medical problems such as heart attack and stroke or death after knee replacement.
- Increased risk in obese people of wound infection, chest infection, heart and lung complications, and thrombosis.
- Increased risk in smokers of wound and chest infections, heart and lung complications and thrombosis.

RISKS OF THIS OPERATION

Please read the patient information booklet "Total knee replacement" for detailed information about the expectations and potential problems following knee replacement. **If you have not been given the information booklet, please ask for one.**

The specific risks of knee replacement include:

- Wound infection. This may require antibiotics, further surgery and the new knee joint may possibly need to be removed, and replaced when the infection has resolved.
- The knee joint can dislocate or feel unstable. Further surgery may be required.
- The bone around the joint may break during or after surgery. A plaster may be required to repair the break or further surgery may be required.

- The artificial joint may fail or wear out or work loose. Surgical revision of the knee joint replacement may be required.
- Numbness at the side of the cut is usual. This may be temporary or permanent.
- Damage to the peroneal nerve around the knee may be caused during surgery, which may result in weakness of muscles to the foot (a 'foot drop'). This may be temporary or permanent. Further surgery may be necessary
- Damage to the blood vessels behind the knee may occur during surgery; this will require further surgery to the vessels and very rarely amputation of the leg.
- Damage to the nerves may cause a burning pain and inability to straighten the leg.
- Stiffness of the knee after the surgery causing difficulty in walking and sitting and pain on movement. Further surgery may be required.
- In some people, healing of the wound may be abnormal and the wound can be thickened and red and the scar may be painful.
- Infection in the joint via the bloodstream, even some years after replacement surgery. The knee joint may have to be removed. To prevent this, you may need to have antibiotics before other procedures and major dental work.
- Death is rare due to knee replacement.

PATIENT DECLARATION

The surgeon has informed me of the proposed procedure and the risks involved. I understand the risks of the procedure, including the risks that are specific to me, and the likely outcomes. The doctor has also explained relevant treatment options as well as the risks of not having the procedure.

The doctor has explained other relevant treatment options and their associated risks.

I have been given a Patient Information Sheet on Anaesthesia. The doctor has explained the risks of anaesthesia and the factors that increase the risks of anaesthesia.

I have been given a Patient Information Sheet / booklet about knee replacement and its risks and benefits.

I have been able to ask questions and raise concerns about my condition, the procedure and its risks, and my treatment options. My questions and concerns have been discussed and answered to my satisfaction.

I understand that the procedure may include a blood transfusion.

I understand that a surgeon other than the consultant surgeon may perform the procedure. I understand this could be a doctor undergoing surgical training.

The doctor has explained to me that if immediate life-threatening events happen during the procedure, they will be treated accordingly.

I understand that no guarantee has been made that the procedure will improve the condition, and that the procedure may make my condition worse.

I consent for the data about my knee replacement to be sent to the National Joint Register and to completing a routine questionnaire and x-ray follow-up of my knee replacement.

I consent to being contacted in the future for involvement in relevant research projects and hospital events.

I consent for my x-ray images and any photographic images of my operation to be used for teaching / training purposes. I understand that these will be anonymised.

Other specific issues discussed/ information given:

On the basis of the previous statements, I request that I undergo a knee replacement.

Name ……...……..

Signature …….

Date …….

Name (Surgeon) …...……..

Signature …….

Date …….