Patient information



Undisplaced Patella Fracture

Knee 2

Fracture Care Team: Shared Care Plan

Trust Switchboard for both sites: 0300 131 4500

Fracture clinic and orthopaedic outpatient appointments:

Eastbourne 0300 131 4788 Conquest 0300 131 4861

Casting Department: Eastbourne 0300 131 5564 Casting Department: Conquest 0300 131 4860

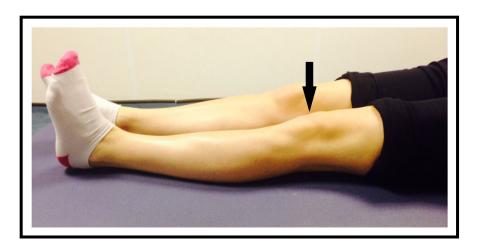
This information explains the ongoing management of your injury.

You have sustained fracture of your patella (knee cap) in your knee. You may walk on your leg as comfort allows. You must wear the splint fitted by the Emergency Department. You can only remove the splint to wash your leg daily. You must keep your knee straight when washing it and replace the splint afterwards.

Your knee may be swollen. Resting and elevating it will help. Take pain killers as required. If you are worried that you are unable to follow this rehabilitation plan, or have any questions, then please phone the Fracture Care Team for advice.

If you are experiencing pain or symptoms, other than at the site of the original injury or surrounding area, please get in touch using the telephone number at the top of this letter.

Picture of injury:



Please follow the Management / Rehabilitation plan shown below:

Weeks since injury	Rehabilitation plan
0 - 6	Wear the splint fitted by the Emergency Department. You may remove it for personal hygiene and to apply a cold pack. However you must keep your leg straight at all times. The splint can be worn either under or over your clothes depending on what you find most comfortable. You are allowed to put weight through the leg as is comfortable, with or without crutches. Continue to wear the splint as advised in your fracture clinic appointment.

Initial advice

Cold packs:

A cold pack (ice pack or frozen peas wrapped in a damp towel) can provide short term pain relief. Apply this to the sore area for up to 15 minutes, every few hours ensuring the ice is never in direct contact with the skin.

Rest and Elevation:

Try to rest the foot for the first 24-72 hours to allow the early stage of healing to begin. Raise your ankle above the level of your hips to reduce swelling. You can use pillows or a stool to keep your foot up.

Early weight-bearing and exercise:

Early weight bearing (putting weight through your injured leg whilst wearing the splint) helps increase the speed of healing.

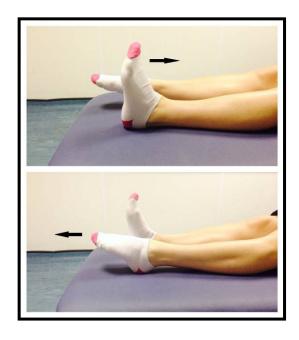
Early movement of the ankle and foot is important for circulation. Follow the exercises below without causing too much pain. These exercises will help the healing process.

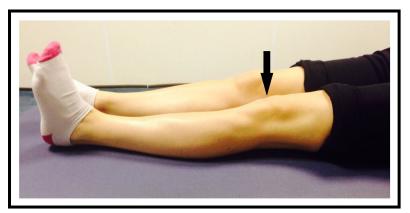
Positioning the Cricket pad splint



Place cricket pad splint on the leg so that your patella (knee cap) is in the middle hole of the splint, as shown below.

Initial exercise to do 3 times a day (with or without the splint)





- 1. Point your foot up and down. Repeat 10 times.
- 2. With the leg straight and supported, gently tense your thigh muscle and try to straighten your knee further. Hold for 10 seconds and repeat 7-10 times.

Sources of information

This information leaflet has been developed by the Fracture Care Team at Brighton and Sussex University Hospitals Fracture Care Team and adapted for use at East Sussex Healthcare NHS Trust. Information updated during the COVID-19 pandemic to ensure that patients with injuries have information, support and care despite social distancing.

Important information

This patient information is for guidance purposes only and is not provided to replace professional clinical advice from a qualified practitioner.

Your comments

We are always interested to hear your views about our leaflets. If you have any comments, please contact the patient experience team on 0300 131 4784 or esh-tr.patientexperience@nhs.net.

Hand hygiene

We are committed to maintaining a clean, safe environment. Hand hygiene is very important in controlling infection. Alcohol gel is widely available at the patient bedside for staff use and at the entrance of each clinical area for visitors to clean their hands before and after entering.

Other formats

If you require any of our leaflets in alternative formats, such as large print or alternative languages, please contact the Equality and Human Rights Department on 0300 131 4434 or esh-tr.AccessibleInformation@nhs.net

After reading this information are there any questions you would like to ask? Please list below and ask your nurse, practitioner or doctor.	

Reference

Thank you to the Brighton and Sussex University Hospitals NHS Trust and to Kate Weatherly, Specialist Orthopaedic Physiotherapist for the first version.

This leaflet can also be found at: www.esht.nhs.uk/leaflet/undisplaced-patella-fracture/

The following clinicians have been consulted and agreed this patient information:

Mr Guy Selmon – Consultant Orthopaedic Surgeon Helen Harper-Smith – Professional Lead Physiotherapist

Hilary Kircher – Clinical / Operational Lead Outpatient Physiotherapist

The Clinical Specialty/Unit that have agreed this patient information leaflet: Diagnostic, Anaesthetic and Surgery - Department of Trauma and Orthopaedics

Next review date: September 2025

Responsible clinician/author: Helen Harper-Smith- Professional Lead Specialist Orthopaedic

Physiotherapist

Prof Scarlett McNally – Consultant Orthopaedic Surgeon

© East Sussex Healthcare NHS Trust – www.esht.nhs.uk