

Soft tissue Injury of the Knee (self-management)

Knee 3

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 leaflet explains the ongoing management of your injury.

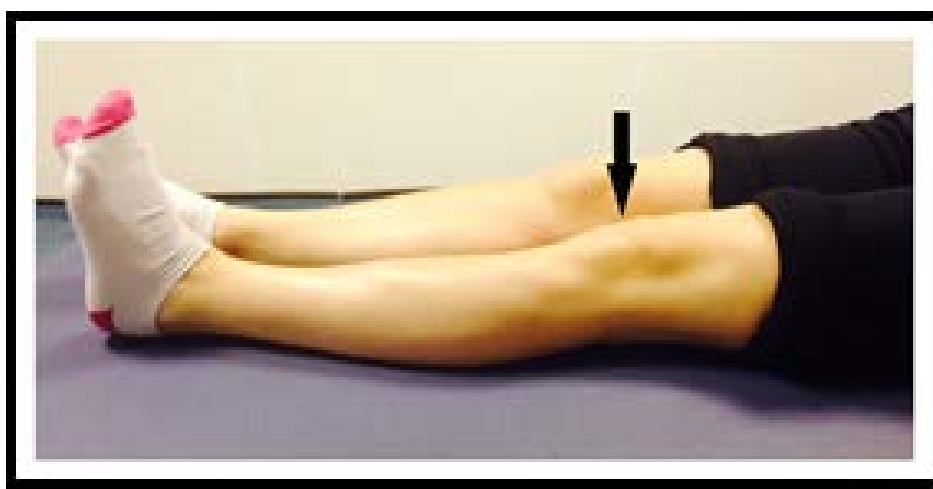
You have sustained a soft tissue injury to your knee. You may walk on your leg as comfort allows and may use crutches and/or a splint if supplied in A&E.

Your knee may be swollen. Resting and elevating it will help. Take pain killers as prescribed. 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. Soft tissue injuries can take approximately 3 months to heal and you will need to adjust your activity level until your movement returns and your pain has resolved.

If you are experiencing pain and symptoms anywhere else, 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 leaflet.

Your case will be kept open for approximately 6 weeks. If we do not hear from you in that time we will assume you are managing well and do not need any further assistance. If, within 6 weeks, you are still struggling, please contact us on the number at the top of the page. We can then further assess your situation. You may then be referred to see a Specialist.

Picture of injury:



Please follow the Management / Rehabilitation plan shown below:

Weeks since injury	Rehabilitation plan
0-3	<p>If you have been given a splint and/or crutches in A&E use these as required in the early stages. You should attempt to wean off of them as soon as possible. Resume normal activities when you can. Remove the splint for personal hygiene. Remove the splint regularly to apply cold packs and to start gentle exercises shown below.</p> <p>The splint can be worn under or over your clothes, whichever is most comfortable.</p> <p>You are allowed to put weight through the leg, with or without crutches, as comfortable.</p>
3 weeks +	<p>If, after 3 weeks, you are struggling with any of the following please contact the fracture clinic to arrange an appointment with a knee specialist:</p> <ol style="list-style-type: none">1. Still using the splint.2. Still have significant swelling.3. Have a feeling (or your knee continues to) give way when walking.4. Are unable to put all of your weight through your leg without crutches.

Initial advice for an acute injury

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. The ice must never be in direct contact with the skin.

Rest:

Try to rest your leg for the first 24-72 hours. However, it is important to maintain movement in your knee. Gently move your knee following the exercises shown. These should not cause too much pain. This will ensure your knee does not become stiff and it will help the healing process.

Elevation:

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 movement and exercise:

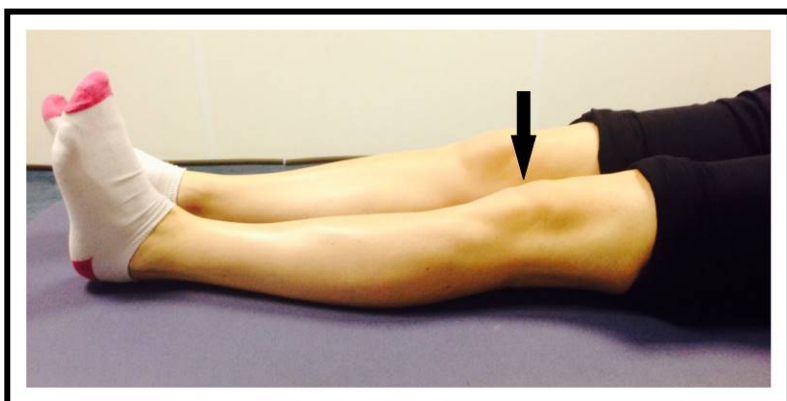
You can weight bear (put weight through your injured leg) with crutches or splint as pain allows. Try to walk as normally as possible as this will help with your recovery.

Fitting the Cricket pad splint



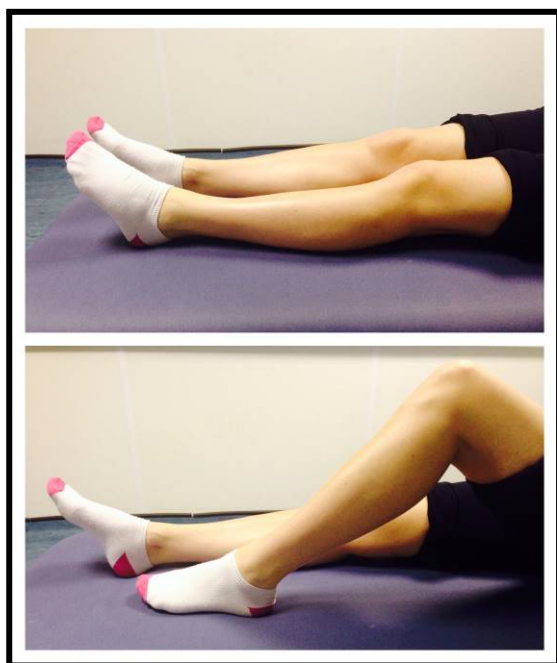
Place cricket pad splint on the leg so that your patella (knee cap) is in the middle hole of the splint, as shown below.

Initial exercises to do 3 x a day:



Static Quads:

With your affected leg straight out in front of you, gently tense your thigh muscle and try to flatten your knee further. Hold for 10 seconds and repeat 7-10 times.

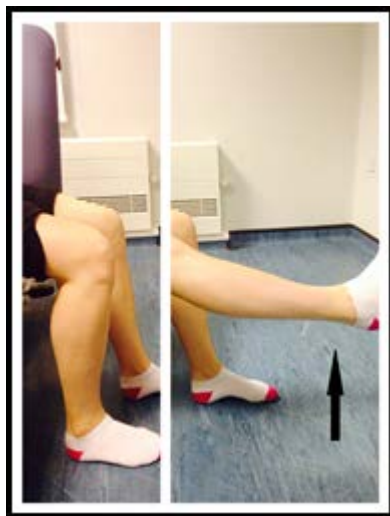


Knee flexion and extension:

Bend and straighten your injured leg, go as far as you feel comfortable. Repeat 7-10 times

When you can do the two exercises above you can progress to this one.

Bend and and straighten your knee when sitting, as comfort allows. If able, hold your leg straight for up to 5 seconds. Repeat 10 times.



Advanced weight bearing exercises

(Start once range of movement has returned and pain is at a minimum):



Using the back of a chair/table for support, bend both knees into a squat position no further than a seated position and then stand up again.

Repeat 5-10 times.



Progression once able to do above exercise pain free by only using your injured leg. **ONLY** do this if you feel you could have done this before your injury.

Repeat 5-10 times.

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/soft-tissue-injury-of-the-knee-self-management/

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

Mr Guy Selmon – Consultant Orthopaedic Surgeon

Mr Andrew Skyrme – 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:

Department of Trauma and Orthopaedics

Next review date: April 2023

Responsible clinician/author: Helen Harper-Smith – Professional Lead Physiotherapist

Mrs Scarlett McNally – Consultant Orthopaedic Surgeon

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