



Experts in Informed Consent

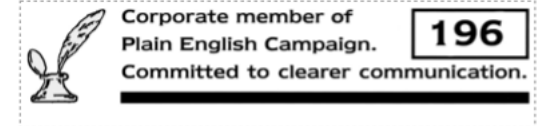
# EIDO Inform Library

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Canadian Association of General Surgeons



ROYAL AUSTRALASIAN COLLEGE OF SURGEONS



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# EIDO Inform Library

- Explanation of the problem
- Treatment options
- What the procedure involves
- Benefits
- Risks
- Alternatives
- Post-op expectations
- Lifestyle changes



**Figure 2**  
An arthroscopy of the knee

Your surgeon will examine the inside of your knee for damage to the cartilages, joint surfaces and ligaments. It is usually possible for your surgeon to trim or repair a torn cartilage without making a larger cut. Your surgeon will close the skin with stitches or sticky strips.

If you have torn your anterior cruciate ligament (ACL), you may need a reconstruction. This is a larger procedure that is usually performed by an arthroscopist.

**What will happen if I decide not to have the operation?**

Damage inside your knee does not usually heal without treatment, although sometimes your knee will become less troublesome with time or after a course of physiotherapy.

If you have a torn cartilage, the tear can sometimes move out of place and cause your knee to lock. If your knee does not unlock again, you will need an urgent arthroscopy.

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## What is an arthroscopy of your knee?

An arthroscopy (keyhole surgery) allows your surgeon to see inside your knee using a camera inserted through small cuts on your skin. Your surgeon can diagnose problems such as a torn cartilage (meniscus), ligament damage and arthritis (see figure 1).

They may be able to treat some of these problems using special surgical instruments, without making a larger cut.

Your surgeon has recommended an arthroscopy of your knee. However, it is your decision to go ahead with the operation or not.

This document will give you information about the benefits and risks to help you to make an informed decision. If you have any questions that this document does not answer, ask your surgeon or the healthcare team.

## What are the benefits of surgery?

The aim is to confirm exactly what the problem is and for many people the problem can be treated at the same time. The benefit of keyhole surgery is less pain afterwards and, for some people, a quicker recovery.

## Are there any alternatives to surgery?

Problems inside your knee can often be diagnosed using a magnetic scan (MRI scan) but you may then need an arthroscopy to treat the problem.

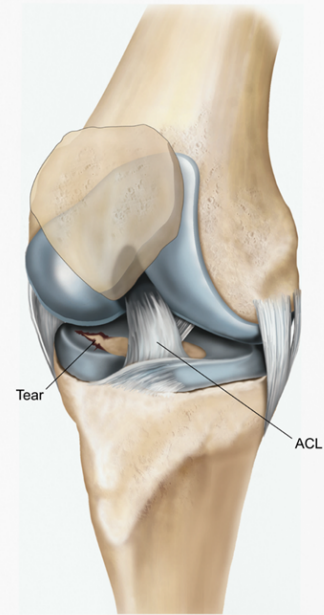
Your surgeon will discuss with you having a scan before the arthroscopy.

Physiotherapy and anti-inflammatory painkillers such as ibuprofen can sometimes prevent or delay the need for an arthroscopy.

## What will happen if I decide not to have the operation?

Damage inside your knee does not usually heal without treatment, although sometimes your knee will become less troublesome with time or after a course of physiotherapy.

If you have a torn cartilage, the tear can sometimes move out of place and cause your knee to lock. If your knee does not unlock again, you will need an urgent arthroscopy.



**Figure 1**  
A right knee with a tear in the lateral meniscus

## What does the operation involve?

The healthcare team will carry out a number of checks to make sure you have the operation done in for and on the correct side. You can confirm to your surgeon and the healthcare team your name and the operation you are having.

Various anaesthetic techniques are possible. Your anaesthetist will discuss the options with you. You may also have injections of local anaesthetic to help with the pain after the operation. The operation usually takes 30 to 45 minutes.

Your surgeon will examine your knee ligaments while you are under the anaesthetic and your muscles are completely relaxed. They will insert a small camera through one or more small cuts around your knee (see figure 2).



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