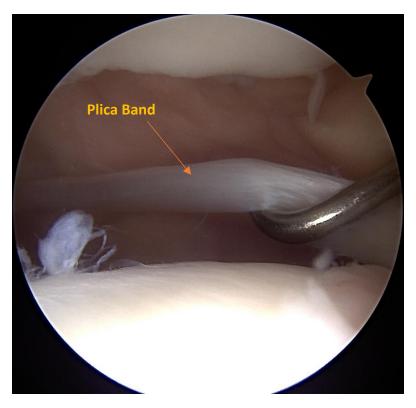
STEVEN CHUDIK MD SHOULDER, KNEE & SPORTS MEDICINE

Knee Arthroscopy for Symptomatic Plica

Indications for Surgery

The plica is a fold of joint lining (synovial tissue) that is a remnant of tissue from embryological development. During embryologic development, bands of tissue divide the limbs into joints. These bands may persist into adulthood in up to 60% of people, although it infrequently causes symptoms. In some people, these bands may become thickened and inflamed, causing varying symptoms. The plica is a structure not commonly seen on MRI. Once patients have failed conservative treatment with possible cortisone injections and physical therapy, surgery is indicated to look in the knee and remove the symptomatic plica.



Operative image of symptomatic plica band





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Contraindications to Surgery

- Infection of the knee
- Inability or unwillingness to complete an appropriate postoperative rehabilitation program

Potential Surgical Risks and Complications

- Infection
- Knee stiffness (loss of knee motion)
- Continued pain
- Weakness of the quadriceps muscles if proper rehabilitation is not performed

Hospitalization and Anesthesia

- Outpatient surgery (you go home the same day)
- IV sedation or light general anesthesia with local numbing medicine injected around the knee

General Surgical Technique

Dr. Chudik performs arthroscopic surgery with the assistance of an arthroscope, a small camera that allows you look inside the knee through small incisions. Small arthroscopic shavers and cutting instruments are used to remove the plica tissue. During this procedure, Dr Chudik will evaluate the meniscus, cartilage, and ligaments of the knee and address any other findings. Following surgery, it is important to begin physical therapy to restore full knee range of motion and function before returning to athletic activities.

Post-Operative Course

- Keep the wound clean and dry for the three days following arthroscopic surgery, then you may shower but not submerge the wounds for three weeks.
- You will use crutches for approximately one to two weeks, if no repairs are necessary in the knee.
- Physical therapy should begin two to three days after surgery and continue for approximately three to four months depending on severity. It is crucial to follow through on and maintain a proper therapy schedule.
- Minimize standing and walking for six weeks with a gradual progression of activity.





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Preoperative Instructions

- Discontinue birth control pills
- Stop blood thinners such as aspirin, Coumadin[®], Lovenox[®], Xarelto[®], Eliquis[®] according to the prescribing doctor's directions
- Stop anti-inflammatory medicines such as ibuprofen, Advil[®], Motrin[®], Naprosyn[®], Alleve[®], etc.)
- Stop nutritional supplements and drinks like Vitamin C, ginseng, ginkgo biloba, etc.
- Stop smoking for surgery and during the first six weeks postoperatively to allow proper tissue healing

Do not eat or drink anything from midnight, the evening before surgery

Scheduling Surgery

Call Dr. Chudik's surgery scheduler at **630-324-0402**, or email <u>contactus@chudikmd.com</u> to:

- Schedule the date and location of surgery
- Schedule an appointment with Dr. Chudik's PA to complete pre-operative surgical education and other requirements
- Schedule a post-operative appointment with Dr. Chudik's team to remove sutures and review post-op instructions

Notify My Office if Symptoms Worsen



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