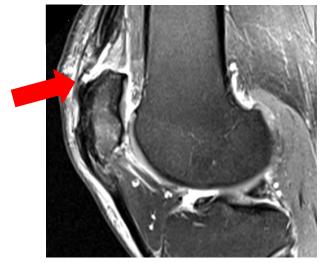
STEVEN CHUDIK MD SHOULDER. KNEE & SPORTS MEDICINE

Quadriceps Tendon Repair

Indications for Surgery

The quadriceps muscles attach to the patella (kneecap) by the quadriceps tendon. When the quadriceps tendon is injured, there is loss of continuity between the quadriceps muscles and the patella and thus loss of function of the quadriceps muscles. The function of the quadriceps muscles is to straighten the knee or slow the knee during bending or squatting. This means that if someone suffers a complete rupture of the tendon they will be unable to fully straighten their knee or walk normally without the knee giving out. The quadriceps tendon is usually torn by a sudden episode of stressful over-activity, such as with jumping, hurdling, or starting a sprint. Repairing the tendon back to the patella is recommended in almost all circumstances since the quadriceps is needed able to walk normally and perform other daily activities.



MRI revealing quadriceps tendon torn off its attachment on the patella (kneecap)

Contraindications to Surgery

- Inability or unwillingness to complete the postoperative program or to perform the rehabilitation necessary
- Infection of the knee (current or previous; not an absolute contraindication)
- Patients with poor general health which is not sufficient to proceed with surgery

Potential Risks and Complications of Surgery

- Post-operative infection
- Swelling or continued pain of the knee



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- Failure of the repair
- Knee stiffness (loss of knee motion) or muscle weakness
- Clot in the veins of the calf or thigh (deep venous thrombosis, phlebitis) that may break off in the bloodstream and go to the lungs (pulmonary embolus)

Hospitalization and Anesthesia

- Outpatient surgery (you go home the same day)
- General anesthetic, femoral block (See Your Surgical Experience booklet)

General Surgical Technique

The goal of the surgery is to repair the torn quadriceps tendon back to the patella to restore normal knee mechanics. Dr. Chudik identifies the torn end of the tendon through a limited incision just over the kneecap. Once identified, sutures are passed through the tendon and then through three small tunnels in the kneecap. These sutures are tied on the opposite side of the kneecap to hold the tendon in place. This repair is connected by keeping the knee locked in a brace in full extension.

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 after midnight the evening before surgery

Post-Operative Course

- A post-op hinged knee brace for six weeks (locked straight for the first six weeks)
- Keep the wound clean and dry for the first 10 to 14 days after surgery. Showering lightly is allowed after two weeks but wounds cannot be submerged under water for three weeks
- If right leg is involved, driving after six to eight weeks and when strength/motion improve
- Return to school/sedentary work in less than one week if the extremity can be elevated
- Physical therapy to restore motion, strength, and balance for up to four to six months.



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Return to Activity

- May walk immediately with knee locked straight in brace
- Return to walking and regular daily activities once the brace is opened to allow motion at six weeks after surgery
- Return to running at about three months post-op
- Return to sports at four to six months post-op depending on level of activity

Scheduling Surgery

Contact Dr. Chudik's surgery scheduler at 630-324-0402 or contactus@chudikmd.com to:

- Schedule the date and location of surgery (the hospital will call the day before with the confirmed arrival time)
- Schedule a pre-operative appointment
- Schedule a post-operative appointment to remove sutures and review post-op instructions

Notify My Office if Symptoms Worsen



