Knee injury discharge advice

A guide for patients and carers

For further information please contact:

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In association with Trauma & Orthopaedics Department

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This information can be made available in another format or language on request. Please contact the Communications and PR Team Tel: 0191 529 7118  Email: mopil@sotw.nhs.uk

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This leaflet has been provided to give you some advice regarding management of your knee injury. You will have been assessed by a member of staff in the Minor Injuries Unit and reassured that you have a soft tissue injury that should settle with appropriate management. The following advice is given to encourage the pain and swelling to settle as rapidly as possible:

**Ice**
This can be applied via gel packs, ice or frozen peas for example (please discard frozen peas immediately after use). It is advised to use an extra layer such as a tea towel between the ice and skin to avoid the risk of an ice burn. Application of ice packs for 20 minutes on a regular basis is thought to be effective at reducing swelling and it is suggested that you apply the ice pack every 2-3 hours. It is also thought that the sooner the ice packs can be applied after injury the better in order to minimise further tissue damage.

**Tubigrip (elasticated bandage)**
If required, Tubigrip will be provided. It should be applied during the day to try and reduce swelling that tends to naturally increase with standing. It should be removed at night.

**Elevation**
Raise the injured leg when sitting or lying to a level at least above the hip. This will encourage the swelling to reduce.

**Pain Relief (analgesics)**
Painkillers such as paracetamol can be used along with anti-inflammatory drugs such as ibuprofen to ease the pain of sprains and fractures and reduce swelling. However, ibuprofen is not recommended if you have a history of asthma, kidney, or liver disease, and aspirin should not be taken by children under the age of 16.

**Appropriate Exercises**
When a knee becomes swollen the thigh muscles will tend to automatically switch off. It is therefore important that you try and maintain muscle activity. This is best done little and often along with gentle bending and straightening of your knee as comfortable.

What happens next?
The knee pain should subside over the next week or so. Activity levels should be gradually increased as you are able. You have not currently been given a follow-up appointment with the Orthopaedic Department because it is unlikely this will be necessary. Should you find that the knee pain or swelling does not improve over the next month we advise that you see your GP.