## **Patient information factsheet**

## **Fulkerson's osteotomy**

#### **Procedure**

This is a procedure designed to realign your patella (knee cap), regaining the natural tracking action it should have.

## After the operation

You will return from theatre with a splint called an IROM brace. This will stop you from bending your knee. You should keep it on whenever you're walking or putting weight on your leg. The brace can be taken off at night, or when you're resting. It can also be taken off in the shower, but you should keep your leg in a straight position when you are doing this. You will need to use the brace for three weeks following your operation.

You will have a small incision (cut) at the front of your knee, just under the patella. This will be covered with a bandage. The day after your surgery, you will have the bandage taken off and a waterproof dressing applied. You will also have an x-ray taken of your knee to check the position of the screws.

## **Walking**

After the operation you will be able to walk putting as much weight as you can through your operated leg. You may need crutches to do this. Your physiotherapist will teach you the correct way of walking with the crutches and how to get up and down the stairs safely.

Try to keep as mobile as you can, as this will help keep your leg as strong as possible. Remember though, 'little and often' is much better for you than walking for long periods of time.

## **Swelling**

You may find it useful to use ice on your knee to reduce the swelling and pain. You should use some chipped ice in a plastic bag wrapped in a damp towel and place this on your knee for 15-20 minutes every two hours. Check with your physiotherapist before you do this and do not use ice if you have problems with your circulation, are diabetic, have numb patches around your knee, have any skin blisters around the wound or have wound healing problems.

When you're resting, keep your leg elevated (up) on pillows to allow a natural reduction of the swelling.

#### **Exercises**

Your physiotherapist will teach you some exercises to keep the quadriceps muscle (the muscle at the front of your thigh) as strong as possible. See the following sheet for details of your exercise programme; you should do these 'little and often'.

#### **Bed transfers**

You must keep your knee straight when getting on and off the bed. The brace will help with this but you must tense your quadriceps muscle whilst lifting the operated leg to ensure a supported, straight knee (see exercise five).

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## **Outpatient appointments**

You will return to clinic to see your surgeon six weeks after your operation.

You will also have been referred from the hospital to be seen by the physiotherapists as an outpatient, starting from three weeks after your operation. They will advise you about weaning yourself out of the brace and show you more exercises to help you start moving your knee again and build up the strength in your leg. You will need to continue with your physiotherapy until your knee is bending properly and you have managed to regain the strength in your leg.

## **Driving**

To return to driving, you must have sufficient range of movement and muscle control of the knee to safely control the car and perform an emergency stop. This is likely to be between six and 12 weeks after surgery. Please liaise with your physiotherapist or consultant regarding your suitability to drive again.

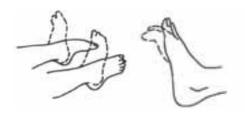
## **Sport**

Your return to sporting activities will depend on the sport and how quickly you regain range of movement of the knee joint and adequate muscle control. Sports-specific rehabilitation can start around 12 weeks following surgery. Please liaise with your physiotherapist regarding your sporting goals.

# **Exercises following a Fulkerson's osteotomy**

Try to complete the exercises at least three times daily. Keep your foot elevated to decrease swelling.

Apply ice, wrapped in a pillowcase or tea towel, to your knee for ten to 15 minutes every hour.



. Lie on your back and move your ankle up and down, wiggling your toes.

Repeat 15 times.



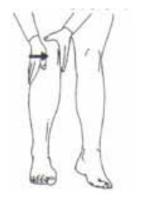
2. Lie on the bed and squeeze your buttocks together. Hold for five seconds.

Repeat 15 times.



3. Lie on your back, pull your toes towards you and brace your knees down firmly against the bed. Hold for ten seconds.

Repeat 15 times.



4. Sit up in bed with your legs straight out in front of you. Place your fingers on the outside edge of your knee cap and gently guide your knee cap to the inner side of your leg (towards your un-operated knee).

Repeat 30 times.

Don't push your knee cap to the outside of your leg.

Don't do this as an exercise in itself, but just as a method to get in and out of bed.



5. Pull your toes towards you and tighten the muscles on the front of your thigh to maintain a straight knee; then lift your leg off the bed.

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## **Contact details**

If you have any questions about Fulkerson's osteotomy, please contact us at:

Orthopaedic physiotherapy team Southampton General Hospital Tremona Road Southampton SO16 6YD

Tel: 023 8079 4452

If you need a translation of this document, an interpreter or a version in large print, Braille or on audio tape, please telephone **023 8079 4688** for help.

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