

KNEE LIGAMENT REPAIR AND RECONSTRUCTION INFORMED CONSENT INFORMATION

The purpose of this document is to provide written information regarding the risks, benefits and alternatives of the procedure named above. This material serves as a supplement to the discussion you have with your physician. It is important that you fully understand this information, so please read this document thoroughly. If you have any questions regarding the procedure, ask your physician prior to signing the consent form. We appreciate your selecting UCLA Healthcare to meet your needs.

The Procedure: The knee is the largest joint in the body and is vital to movement. Two sets of ligaments in the knee give it stability: the cruciate and the collateral ligaments. The cruciate ligaments are located inside the knee joint and connect the thigh bone (femur) to the shin bone (tibia). They are made of many strands and function like short ropes that hold the knee joint tightly in place when the leg is bent or straight. This stability is needed for proper knee joint movement. The name, cruciate, derives from the word crux, meaning cross, and crucial. The cruciate ligaments not only lie inside the knee joint, they crisscross each other to form an "x". Operative treatment (either arthroscopic or open surgery) uses a strip of tendon, usually taken from the patient's knee (patellar tendon) or hamstring muscle, that is passed through the inside of the joint and secured to the thigh bone and shin bone. Surgery is followed by an exercise and rehabilitation program to strengthen the muscles and restore full joint mobility.

Benefits

You might receive the following benefits. The doctors cannot guarantee you will receive any of these benefits. Only you can decide if the benefits are worth the risk.

- 1. Reduced instability of the joint
- 2. Reduced pain

- 3. Reduced chance of injuring other structures in your knee, including articular cartilage and meniscus
- 4. Increased chance of returning to an active lifestyle
- 5. Improved level of function
- 6. Reduced swelling

Risks

Before undergoing this procedure, understanding the risks is essential.

No procedure is completely risk-free. The following risks may occur, but

there may be unforeseen risks and risks that are not included on this list. Some of these risks, if they occur, may necessitate additional surgery, prolonged hospitalization, and/or extended outpatient therapy to permit adequate treatment.

- 1. Scar tissue may prevent normal range of motion and function, necessitating corrective surgery.
- 2. The repaired cruciate ligament may fail, necessitating reoperation.
- 3. There may be temporary or permanent stiffness, swelling, and pain after the procedure.
- 4. It is possible, though unusual, to experience a bleeding episode during or after surgery. Should post-operative bleeding occur, it may require emergency treatment to drain accumulated blood (hematoma) and blood transfusion.
- 5. An infection is rare after surgery. Should an infection occur, treatment including antibiotics or additional surgery may be necessary.

- 6. Scarring may result in permanent deformity.
- 7. There may damage to the nerves, which could lead to tingling, numbness, pain, and weakness in the affected area.
- 8. You may develop fluid collections in the joint, necessitating removal through a needle.
- 9. You may experience a heart attack or stroke; blood clots may accumulate in the veins or lungs.
- 10. You may develop an allergic reaction to tape, suture material, or topical preparations. Systemic reactions that are more serious may result from drugs used during surgery and prescription medicines. Allergic reactions may require additional treatment.
- 11. Depending on the type of surgery performed, complete healing may be prolonged.
- 12. The surgery may fail to achieve the intended results, necessitating a reoperation.
- 13. In spite of the surgery, your condition may become worse.

Alternatives

The alternatives to this procedure include:

- 1. Medications
- 2. Physical therapy
- 3. Not performing the surgery
- 4. Bracing

- 5. Alteration of life style
- If you decide not to have this procedure, there may be associated risks to this decision. Please discuss it with your doctor.

Physician Signature	Dat
Patient Signature	Dat



KNEE LIGAMENT REPAIR AND RECONSTRUCTION INFORMED CONSENT INFORMATION

The purpose of this document is to provide written information regarding the risks, benefits and alternatives of the procedure named above. This material serves as a supplement to the discussion you have with your physician. It is important that you fully understand this information, so please read this document thoroughly. If you have any questions regarding the procedure, ask your physician prior to signing the consent form. We appreciate your selecting UCLA Healthcare to meet your needs.

The Procedure: The knee is the largest joint in the body and is vital to movement. Two sets of ligaments in the knee give it stability: the cruciate and the collateral ligaments. The cruciate ligaments are located inside the knee joint and connect the thigh bone (femur) to the shin bone (tibia). They are made of many strands and function like short ropes that hold the knee joint tightly in place when the leg is bent or straight. This stability is needed for proper knee joint movement. The name, cruciate, derives from the word crux, meaning cross, and crucial. The cruciate ligaments not only lie inside the knee joint, they crisscross each other to form an "x". Operative treatment (either arthroscopic or open surgery) uses a strip of tendon, usually taken from the patient's knee (patellar tendon) or hamstring muscle, that is passed through the inside of the joint and secured to the thigh bone and shin bone. Surgery is followed by an exercise and rehabilitation program to strengthen the muscles and restore full joint mobility.

Benefits

You might receive the following benefits. The doctors cannot guarantee you will receive any of these benefits. Only you can decide if the benefits are worth the risk.

- 1. Reduced instability of the joint
- 2. Reduced pain

- 3. Reduced chance of injuring other structures in your knee, including articular cartilage and meniscus
- 4. Increased chance of returning to an active lifestyle
- 5. Improved level of function
- 6. Reduced swelling

Risks

Before undergoing this procedure, understanding the risks is essential. No procedure is completely risk-free.

The following risks may occur, but there may be unforeseen risks and risks that are not included on this list. Some of these risks, if they occur, may necessitate additional surgery, prolonged hospitalization, and/or extended outpatient therapy to permit adequate treatment.

- 1. Scar tissue may prevent normal range of motion and function, necessitating corrective surgery.
- 2. The repaired cruciate ligament may fail, necessitating reoperation.
- There may be temporary or permanent stiffness, swelling, and pain after the procedure.
- 4. It is possible, though unusual, to experience a bleeding episode during or after surgery. Should post-operative bleeding occur, it may require emergency treatment to drain accumulated blood (hematoma) and blood transfusion.
- 5. An infection is rare after surgery. Should an infection occur, treatment including antibiotics or additional surgery may be necessary.

- 6. Scarring may result in permanent deformity.
- 7. There may damage to the nerves, which could lead to tingling, numbness, pain, and weakness in the affected area.
- 8. You may develop fluid collections in the joint, necessitating removal through a needle.
- 9. You may experience a heart attack or stroke; blood clots may accumulate in the veins or lungs.
- 10. You may develop an allergic reaction to tape, suture material, or topical preparations. Systemic reactions that are more serious may result from drugs used during surgery and prescription medicines. Allergic reactions may require additional treatment.
- 11. Depending on the type of surgery performed, complete healing may be prolonged.
- 12. The surgery may fail to achieve the intended results, necessitating a reoperation.
- 13. In spite of the surgery, your condition may become worse.

Alternatives

The alternatives to this procedure include:

- 1. Medications
- 2. Physical therapy
- 3. Not performing the surgery
- 4. Bracing

- 5. Alteration of life style
- 6. If you decide not to have this procedure, there may be associated risks to this decision. Please discuss it with your doctor.

Physician Signature	Dat
Patient Signature	Dat