

**STEVEN CHUDIK MD**  

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**SHOULDER, KNEE & SPORTS MEDICINE**

## **Arthroscopic Knee Arthrofibrosis Release**

### **Indications for Surgery**

Loss of motion after surgery or injury can occur due to scar tissue formation. Scar tissue will stretch out when forced, but it likes to contract and tighten back up afterward. There is a limited window of opportunity after surgery or injury that is best to stretch and break up scar tissue. If it is not done during that window it can be very difficult to regain normal motion. When sufficient time has passed since the surgery or injury and motion is not improving despite proper conservative means, arthroscopic arthrofibrosis (joint stiffness and scarring) release is indicated.

### **Contraindications to Surgery**

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

### **Potential Surgical Risks and Complications**

- Infection
- Persistent knee stiffness (loss of knee motion), worse than before if not compliant with post-operative program

### **Hospitalization and Anesthesia**

- Outpatient surgery (you go home the same day)
- General anesthesia and local anesthetic

### **General Surgical Technique**

Dr. Chudik performs the surgery with the assistance of an arthroscope (small camera that allows you look inside the knee through small incisions). Dr. Chudik uses special arthroscopic instruments to remove and release the scar tissue causing the loss of motion. Then, while you are still asleep, he moves your knee back and forth to ensure full motion is possible.

### **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 comfort only



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- Physical therapy should begin two to three days after surgery and continue for approximately six weeks to a few months depending on degree of stiffness and amount of motion lost. The success of the surgery is dependent on your diligence with the post-operative rehabilitation. It is crucial to follow instructions and perform frequent and aggressive stretching.

### Return to Activity

You may return to activities when there is no pain and when full knee range of motion, muscle strength and endurance, and functional use has been restored.

### Preoperative Instructions

- Discontinue birth control pills
- Stop blood thinners such as aspirin, Coumadin<sup>®</sup>, Lovenox<sup>®</sup>, Xarelto<sup>®</sup> according to the prescribing doctor's directions
- Stop anti-inflammatory medicines such as ibuprofen, Advil<sup>®</sup>, Motrin<sup>®</sup>, Naprosyn<sup>®</sup>, Alleve<sup>®</sup>, 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 [contactus@chudikmd.com](mailto:contactus@chudikmd.com)/ 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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