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Right Total Knee Arthroscopy in Female Geriatric Patient

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Background: Patient is a fifty-nine year old female dining services worker. Pertinent aspects of the patient's medical history include arthritis and previous right ankle surgery. She stated that she previously was told by her physician that she needed her knee replaced and waited eleven years to get the procedure done. The patient originally reported that her pain level was an average of a seven of out ten, with ten being the most severe level of pain. She stated that is feels as if someone is "sticking a knife in." At its best, her pain was a six out of ten on the pain scale, and at its worst, it was at a ten out of ten. She rated her activity at a two out of ten, with ten being the most active. Upon observation, the patient had gross amounts of swelling and extreme deficits and limitations in muscular function and range of motion. Upon initial observation, the patient ambulated with a walker, had decreased heel strike, toe off and knee flexion in the swing phase of gait. **Differential Diagnosis:** The known diagnosis as that of a total knee arthroplasty.

Treatment: The patient was put through a rehabilitation process beginning on 8/20/14 with an initial evaluation. She received an hour of treatment three days a week concluding each session with assisted passive manual therapy followed by cryotherapy and premodulated electrical stimulation. The goals of the rehabilitation process

were to establish and increase overall strength of the affected joint as well as increase range of motion. Decreases in swelling and levels of pain was noted as well throughout the process. Patient's personal goals were to be able to get back to work as quickly as possible. **Uniqueness:** The use of manual extension after each rehabilitation session decreased the patient's overall girth in the knee and increased the patient's ranges of motion in all planes of motion. The patient stated that because of previous injuries and habitual gait patterns, her knee had never been able to be completely straight.

Conclusions: To summarize, the patient, a fifty-nine year old dining services worker, underwent a total knee replacement that lead to severe levels of swelling and limited range of motion. With the implementation of a consistent rehabilitation protocol and the use of modalities the patient was able to recover quicker, have less overall pain and reach levels of range of motion that she had never had before.

Clinical Applications: The use of manual extension after each rehabilitation session shows improvements in objective criteria such as range of motion, decreases in girth measurements and improved gait patterns. However, subjective aspects of the patient's recovery, such as return to activity and quality of life, can be significant as well.

Key words: arthroplasty, arthroscopy, total knee replacement, manual extension