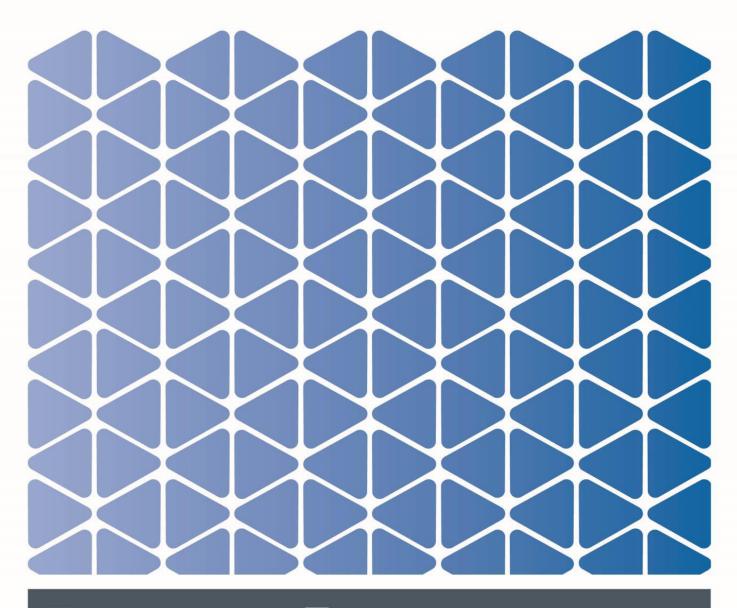




PATIENT INFORMATION

KNEE RANGE OF MOVEMENT BRACE



www.worcsacute.nhs.uk

f @WorcsAcuteNHS

𝒴 @WorcsAcuteNHS

The purpose of this leaflet is to:

- Explain why you have been provided with a knee range of movement brace
- Tell you about the risks and benefits of wearing a knee range of movement brace
- Explain how to put the brace on and off and how to attend to your personal care needs (i.e. washing and dressing)
- Encourage you to commence some gentle exercises whilst wearing your brace

Why have you been provided with a knee range of movement brace?

You have been prescribed a knee range of movement brace by your orthopaedic consultant. This is often following an injury or surgery to your knee. It allows the area you have injured, or which has been operated on to heal without putting too much stress or strain to the area. The knee brace works by giving some support either side of your knee joint and can also be locked to stop your knee bending at all, or to move between set ranges. These ranges will be decided by your consultant and can be changed at intervals through your recovery as required. The brace has been fitted for your use only. Do not adjust it or fit it to anyone else. It is important to wear the brace as instructed.

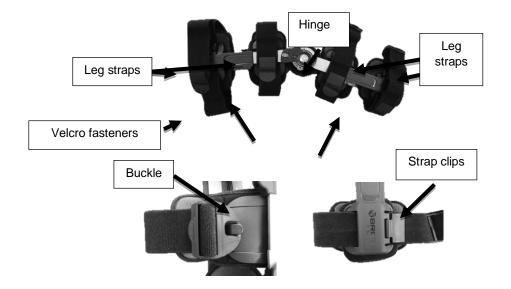
How long do I have to wear the brace for?

You should wear your knee brace for as long as directed by your consultant. Your knee brace should be worn at all times especially whilst sleeping and all activities where you are on your feet. It is advised to wear the brace directly next to your skin, with your clothes over the top of the brace, in order to get the best fit and support.

You will receive a review with the orthopaedic clinic where your consultant will decide how long the brace is needed for.

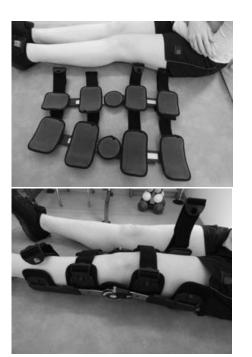
What are the risks of wearing a knee range of movement brace?

The main risk of wearing a knee range of movement brace is the development of pressure areas on your skin where the brace rests. You will be shown by your physiotherapist, occupational therapist or orthotist where to look for these. There may be some red marking of the skin when you remove the brace, this is normal and the marks should disappear within half an hour. It is important to check your skin regularly especially if you have altered sensation.

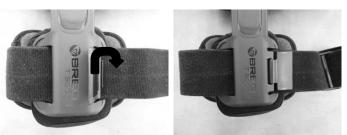


How do I put my brace on and off?

The brace should be fitted in a lying or long sitting position on a bed. It is possible to fit the brace yourself but it is much easier to get someone to help you with this.



- 1. Open the buckles and lay the brace flat underneath your leg with your knee positioned centrally between the hinges. The smaller calf pads should be towards the feet.
- 2. Loosely fasten the buckles directly above and below your knee first, followed by the other two.



3. Pull straps tight to remove all the excess slack from behind the leg, ensuring the bars stay in position either side of the leg. Lock down the strap clips.





- 4. Pull strap tightly through the loops, again maintaining the position of the bars. Fasten the ends down using the crocodile Velcro tab at the ends. You may need to shorten the strap - fold the strap over before attaching the crocodile Velcro to do this.
- 5. After initial fitting, the brace should be taken off and on by unclipping the buckles only. The Velcro may need adjusting from time to time, for example when bandages are removed, swelling changes etc. This can be adjusted as described above.

Removal of brace

The brace should only be removed for washing or as instructed by your consultant or physiotherapist.

Washing and dressing

It is advised to wear your clothes over the top of your brace. You may find it best to wear loose fitting clothes to accommodate the brace.

You will not be able to shower or bathe with your brace on and will therefore need to wash around the brace.

Exercises

Whilst you need to wear the hip brace it is advised that you carry out some maintenance exercises to help your circulation and to keep your muscles strong. The following exercises are safe to carry out and should not compromise the recovery of your knee. Try to carry out the exercises 3 times a day at regular intervals.

Bed exercises:

1) Circulation exercises – pump your feet up and down and make circular movements for 2 minutes.



- Static quads Lying on the bed with your leg straight out in front of you. Tighten the muscles at the front of your thigh to press the back of your knee into the bed. Hold the tightening for 5 seconds and repeat 10 times.
- 3) Buttock squeezes Lying on the bed with your legs straight out in front of you. Squeeze your buttock muscles together. Hold for 5 seconds and repeat 10 times.
- 4) Calf stretch Hook a towel or a belt around the ball of your foot, holding on to both ends in your hands. Pull on the ends to pull your toes up towards you and stretch your calf muscle. Hold for 30 seconds and repeat 5 times.

Driving

It is advised not to drive while you are required to wear the brace as it may restrict some necessary movements and also invalidate your insurance policy. Please discuss this further with your consultant and insurance company if needed.

Contact details

If you have any specific concerns that you feel have not been answered and need explaining, please contact the Physiotherapy Department or Orthotics Department between 8:30am and 4:30pm Monday to Friday on the direct dial numbers below:

Physiotherapy:

Worcestershire Royal Hospital

01905 760622 / 760187

Alexandra Hospital

01527 512114

Kidderminster Hospital and Treatment Centre 01562 513066

Orthotics:

Worcestershire Royal Hospital 01905 760184

Alexandra Hospital 01527 503860

If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.

Patient Experience

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

Feedback

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

Patient Advice and Liaison Service (PALS)

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

How to contact PALS:

Telephone Patient Services: 0300 123 1732 or via email at: wah-tr.PALS@nhs.net

Opening times:

The PALS telephone lines are open Monday to Friday from 8.30am to 4.00pm. Please be aware that you may need to leave a voicemail message, but we aim to return your call within one working day.

If you are unable to understand this leaflet, please communicate with a member of staff.