

OPERATIVE REPORT
THE ORTHOPAEDIC SURGERY CENTER

Northwest Orthopaedic Specialists
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SURGEON: Khalid Shirzad, MD

SURGERY DATE: 08/31/2011

lateral aspect of the ankle was evaluated and she did have thickening noted in the anterolateral gutter. Posteriorly there was no evidence of damage to the articular surface of the tibia or the talus and, again, the thickened ligament was noted along the lateral aspect of the joint. Next, the portal sites were exchanged and the camera was placed into the anterolateral portal and the lateral gutter was examined, and there were no loose bodies noted. There were no loose bodies or chondral injuries noted to the lateral talar dome and the lateral aspect of the tibia. The medial gutter was also evaluated and there were no loose bodies or fragmentation noted. The camera was then replaced into the anteromedial portal and the lateral aspect of the ankle joint was evaluated. Then, using a combination of the shaver and biting instruments, the thickened ligament was then débrided down and the tissue that was felt to be causing the impingement was débrided. Once adequate debridement was performed, a chondroplasty was also done. All of the instrumentation was then removed and the ankle was assessed for stability. It was stable with both anterior drawer and talar tilt testing. Next, the arthroscopic portal sites were closed with 4-0 Vicryl suture and 10 cc of Marcaine with epinephrine was placed into the ankle joint for postoperative ankle management. The incisions were then dressed with Xeroform, 4 x 4s, and Kerlix. The tourniquet was deflated at 49 minutes and she was placed into a walking boot. She was then reversed from anesthesia and taken to the PACU in stable condition.

Postoperative plan: She will be allowed to continue weightbearing as tolerated in her cam boot. She will change her dressings in three days and, at that time, can transition to regular footwear. I do want her to work on range of motion of the ankle at that point. Should she have any questions or concerns she will not hesitate to call clinic.

Digitally Authenticated by
Khalid Shirzad, MD/sjm R: (09/01/2011) T: (09/03/2011)