

Physiotherapy - Orthopaedics

Managing your hinged knee brace

This information is for patients who require a hinged knee brace following their surgery.

You have had a:

- Meniscal repair
- Meniscal Transplant (MAT)
- MACI/OATS procedure
- MCL/LCL reconstruction
- ACL reconstruction
- Multi ligament repair.....
- Quadriceps tendon repair
- Microfracture procedure
- High tibial osteotomy (HTO)
- Distal femoral osteotomy (DFO)
- Tibial plateau fixation
- Tibial Tubercle Osteotomy
- Trochleoplasty
- Other.....



Patient Information

Important

- **You must follow the advice in this leaflet to protect your knee during your recovery. If you do not follow this advice there is a risk that your surgery will be unsuccessful.**
- **You must not remove the brace unless you are told to by your physiotherapist or consultant.**
- **You must not adjust the settings for your brace unless you are told to by your physiotherapist or Consultant.**

Wearing and settings

You must wear your brace:

- When mobilising only
- Throughout the day (and if mobilising during the night) only
- Day and night

When you are mobilising, your brace will be set at

When you are at rest, your brace will be set at

Weight-bearing.....

Washing

You may remove the brace to wash, but you must dry the skin thoroughly. You must reapply your brace as soon as you have finished washing.

Reapplying your brace

When reapplying your brace, ensure the brace hinges sit either side of your kneecap. The brace can slip down if the straps are too loose. The straps should be tightened so that only 2 fingers can fit underneath them.

A physiotherapist will show you how to do this after your surgery.

Patient Information

As bandages are removed and swelling decreases, it may be necessary to tighten the straps yourself at home using the Velcro tabs.

Cold therapy/ice

Your brace can be opened to allow application of cold therapy or ice if your leg is fully supported and you remain within your range of movement restrictions stated above. For example, if you are limited 10 – 90 degrees of motion, you must have a towel or cushion to support your knee when opening the brace to make sure your knee does not fully straighten.

When using ice, wrap ice in a tea towel before applying. Never apply ice directly onto your skin

Crutches or walking frames

If you have been provided with elbow crutches or a walking frame, you will be guided by the physiotherapist about when to stop using them. This will depend on the range and weight bearing status allowed within your brace.

Please continue to mobilise with the walking aids provided on discharge from hospital until advised otherwise by your physiotherapist or consultant.

Issues with your brace

If you have any issues with your brace, please keep it on and discuss this with your physiotherapist at your outpatient appointment or call on the Cedar Therapy Team on 01788 663054.

Concerns with your wound

If you have any concerns about your wound as it:

- becomes red or inflamed
- starts to ooze or discharge
- starts to bleed
- starts to smell

Please use this telephone number to leave a message: 024 7696 8333.

Patient Information

Your messages will be picked-up Mon-Fri 07:30-17:30, Sat-Sun 07:30-13:30.

For out-of-hours support you will need to go to A&E or the Urgent Treatment Centre.

Contact us

If you have any questions or concerns about your physiotherapy, please telephone the Orthopaedic Therapy Department between

08:00 - 17:00:

Rugby St Cross: 01788 663054

University Hospital Coventry: 024 7696 5106

Or telephone the Therapy Outpatient Department (Monday – Friday) between 08:30 -16:30:

Rugby St Cross: 01788 663257

University Hospital Coventry: 024 7696 6013

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The Trust has access to interpreting and translation services. If you need this information in another language or format please contact your physiotherapy department and we will do our best to meet your needs.

The Trust operates a smoke free policy.

Document History

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