



**University of North Carolina Wilmington
Abrons Student Health Center**

**INSTRUCTION SHEET:
KNEECAP (PATELLA) DISLOCATION**

The Student Health Provider has treated you today for a kneecap (patella) dislocation (bone out of place).

A kneecap dislocation occurs when force applied to the knee causes the patella to slip out of place. The ligaments and tendons (rope-like bands) holding the kneecap give way, allowing the patella to move out of joint. The kneecap almost always dislocates toward the outside of the leg.

The dislocation has been reduced (the bone is back in place). A knee immobilizer has been applied to keep the joint still and the knee joint in extension (straight, not bent). Keeping the joint still for many weeks is essential to allow healing. Adequate healing will help prevent repeated dislocations in the future.

MEASURES YOU SHOULD TAKE TO HELP TREAT YOUR KNEECAP DISLOCATION:

1. Stay off your leg as possible. Elevate your leg to help minimize discomfort and swelling.
2. Keep the knee immobilizer on until an orthopedic (bone) doctor okays removal. You can loosen the immobilizer to apply cold, but keep the knee straight, resting on a level surface. Likewise, you can remove the immobilizer briefly to bathe, but keep the knee joint straight.
3. Apply cold packs to the knee off-and-on for the first 48 hours after injury. Cold helps control pain and swelling. Do not apply ice directly to the knee, causing discomfort. Aim for coolness, yet comfort, keeping a layer or two of cloth between the cold pack and knee.
4. Over-the-counter pain medications can relieve discomfort associated with a dislocated patella. Acetaminophen (Tylenol), ibuprofen, or naproxen can be taken, depending on individual preference.
5. The provider may prescribe stronger pain medication. Take the prescription medicine only if needed; do not take the medication and perform dangerous activities such as driving a car or operating machinery.
6. Make a prompt follow-up appointment with your personal/referral orthopedic doctor. Be sure to tell the office you had a dislocated kneecap and need a “work-in” appointment in the next one or two days. If you had X-rays made, pick up your X-rays before your appointment. The orthopedic doctor can follow the progress of healing, help minimize the possibility of recurrent dislocations and long-term problems, and assist you in starting rehabilitation exercises.
7. If you are having severe pain or an unusual problem with the knee, return to the Student Health Center or see your personal/referral doctor promptly.