

Acute Fixation of Hand/Upper Extremity Fractures Information Sheet

General indications for the procedure:

The indications for the procedure are to get improved alignment of the bones and stable fixation of the bones to allow healing in an acceptable alignment.

Description of Procedure:

The bones will be lined up using a combination of pulling on the bones or surgical devices to squeeze the bones together. Depending on the exact fracture type, this will be done through either an open incision or with x-ray guidance. After the bones are adequately lined up, they will be adequately stabilized with either pins, wires, screws, or plates which are either left sticking outside the skin or completely under the skin depending on the exact location of the fracture. In some cases the bones will be lined up and attached perfectly together; in some cases they will simply be lined up in an overall acceptable length alignment and rotation which allows stabilization through a minimally invasive approach. This procedure is done under general or regional anesthesia.

Risks of the Procedure:

The risks of the procedure include infection at the surgical site, non-healing of the fracture, the bone healing in a slightly crooked position, rotated position, or with the bone slightly shortened or lengthened, injury to arteries or nerves in the area of the fracture or surgical incisions (particularly numbness around the surgical incision is common), excessive swelling of the muscles around the fracture called compartment syndrome which would necessitate a surgical release of the muscles, painful hardware that would later removal after the fracture is healed, pain in the area of the surgical incision, or stiffness of the joints after healing.

Procedure Alternatives, if any:

The alternatives to the surgery are nonoperative treatment using casting or bracing; this will have the risk of the bone not healing or increased risk of the bone healing in improper alignment and stiffness of the joints around the fracture.

Probable Consequences of Refusing Procedure:

These are those mentioned in nonoperative treatment.

Person(s) Performing the Procedure:

The key portions of this procedure will be performed by the attending physician with the assistance of the Orthopaedic Resident Staff under direct supervision of the attending physician. The portions of the procedure performed by the Orthopedic Resident Staff will be based on their level of competency and consistent with hospital policy.