

## Procedure Information Sheet - Calcaneal Fracture Fixation Surgery

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### **Introduction**

The calcaneus is the lowest piece of bone in the foot & ankle. It withstands the highest pressure of the body, at the same time it forms a major part of the subtalar joint, which is essential for one's ability to walk on uneven ground. Calcaneal fracture is one of the most common fractures of the foot.

### **Procedure**

Operation is to reduce the fracture, and fix it with screws or plate internally. The goal of the surgery is to preserve the joint, reduce complications of a displaced fracture, at the same time allows rapid return of joint motion. The method commonly uses a lateral approach, an open reduction and internal fixation. If there is significant bony defect, you may require bone grafting.

### **Pre-operative preparation**

1. You will need to sign a consent form and your doctor will explain to you the reason, procedure and possible complications.
2. Optimization of pre-existing medical conditions, e.g. heart disease, hypertension, diabetes mellitus, anaemia, asthma, etc.
3. Blood tests and X-ray.
4. Keep fast for 6-8 hours before operation.

### **Possible risks and complications**

#### ***A. In general risks***

- Like other orthopaedic operations, those associated with anesthesia, medical illness, wound risk and complications, such as pneumonia, infection, blood loss, stroke, heart attack, failure to recover etc. They can endanger body, mind and life, and may call for further treatment.

#### ***B. Specific risks***

- Risks are related to the fracture itself: non-union, mal-union, joint stiffness, and post-traumatic osteoarthritis etc.
- Other risks are wound complications, nerve injuries, complex pain syndrome and problems with implants including loosening or exposure. All may require further action.

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### Post-operative information

1. Patients who are free of Plaster of Paris, they usually need crutches for non-weight-bearing walking for 6 weeks. Physiotherapy for ankle and subtalar joint exercise is most important. For heavy manual workers, occupational therapy is an important part of rehabilitation.
2. Wound healing can be complicated. Persistent pain is not uncommon and prolonged treatment needs patience.
3. For implant removal, it should be considered in individual situations; but if patient requests, it should be done after the fracture has fully healed.
4. Please contact your doctor or go back to hospital if excessive bleeding, collapse, severe pain or signs of infection at your wound site such as redness, swelling or fever (body temperature above 38°C or 100°F) occurs.
5. Follow up on schedule as instructed by your doctor.

### Remark

The above mentioned procedural information is not exhaustive, other unforeseen complications may occur in special patient groups or individual differently. Please contact your physician for further enquiry.

**Reference:** [http://www21.ha.org.hk/smartpatient/tc/operationstests\\_procedures.html](http://www21.ha.org.hk/smartpatient/tc/operationstests_procedures.html)

I acknowledge that the above information concerning my operation/procedure has been explained to me by Dr. \_\_\_\_\_. I have also been given the opportunity to ask questions and receive adequate explanations concerning my condition and the doctor's treatment plan.

Name: \_\_\_\_\_

Pt No.: \_\_\_\_\_ Case No.: \_\_\_\_\_

Sex/Age: \_\_\_\_\_ Unit Bed No: \_\_\_\_\_

Case Reg Date & Time: \_\_\_\_\_

Attn Dr: \_\_\_\_\_

Patient / Relative Signature: \_\_\_\_\_

Patient / Relative Name: \_\_\_\_\_

Relationship (if any): \_\_\_\_\_

Date: \_\_\_\_\_