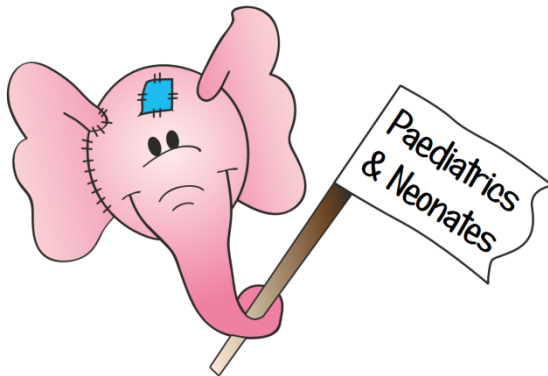


Operation to remove metal work

Children's Ward Patient Information Leaflet



Introduction

The hospital doctor has suggested that you have an operation to remove some metal work from your bones. This leaflet explains more about the operation, the benefits and risks, and what to expect when you come to hospital.

If you have any questions or concerns, please contact a member of the Children's Ward.

What is metal work used for?

It is used by doctors for quite a few things, such as to hold broken bones together until they heal. It can include plates, screws, wires, rods and staples. These are made of either stainless steel or titanium, and may be inside your body or on the outside where you can see them.

Why do I need this operation?

When the bone has healed, the metal work has done its job so it can be taken out. Your doctor will definitely suggest you have it taken out if it is causing you any pain.

Usually, the doctor will use the same wound site to take the metal work out that they used to put it in. This means that there will only usually be one scar.

What are the benefits of the operation?

The benefits are:

- If the metal work is causing you pain, this will stop when you have recovered from the operation.
- It will stop bone growing over the metal work, if you are still growing.
- If there are any other problems being caused by the metal work, such as ulcers or infection, these should settle down after the operation.
- It will allow you to start moving easier or have physiotherapy.
- It could help reduce any anxiety that you have.

What are the risks?

As with all operations, there are a few risks:

- You may get some bleeding after the operation although this is very rare. If this happens on the day of your operation, you might need another operation to stop it.

- You may get an infection after the operation. If this happens, you may need to have antibiotics to treat it. Antibiotics are medicines that kill bacteria.
- There are some very rare risks if you have a general anaesthetic. Your anaesthetist will discuss these with you before you have your operation. After the anaesthetic, some people feel sick or are sick. You may have a headache, sore throat or feel dizzy or lightheaded but this should not last very long.
- There is a very rare risk that where your fracture was, may re-fracture following removal of your metal work. Make sure you rest following your operation.

You can discuss the risks with your doctor.

What is the alternative?

There is no other way of removing the metal work but you can decide to leave it where it is. If you are in pain, painkillers may help. If you are having a lot of infections, these can be treated with antibiotics.

However, the only way to take away the pain and allow any infection to settle down in the long term is to have it taken out.

What does the operation involve?

A surgeon will carry out the operation. They will try to use the original operation site to remove the metal work. The wound will be sealed using stitches.

The operation is carried out using a general anaesthetic. This means you will be asleep for the operation. The person who gives you the general anaesthetic is called an anaesthetist.

The anaesthetic is given to you through a cannula that is put into the back of your hand. A cannula is a thin, plastic tube (please see figure 1).

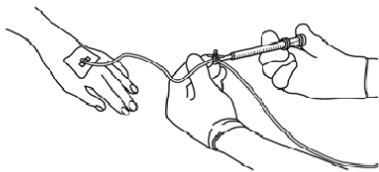


Figure 1 shows a cannula

What happens before the operation?

If you are having your operation in the morning, you must not eat anything after midnight. That means no breakfast. You can have a drink of water or squash before 6.30am. You may be able to have a drink of water or squash when you arrive on the ward. The nurse will discuss this with the surgeon and let you know.

If you are having your operation in the afternoon, you can have a light breakfast of toast, but not anything with milk (no cereal). You can also have a drink of water or squash. You can have a glass of water or squash at 11am before you come into hospital. You may be able to have a drink of water or squash when you arrive on the ward. The nurse will discuss this with the surgeon and let you know.

If your operation is in the afternoon, it is a good idea to bring an overnight bag, just in case you need it. Include pyjamas, slippers, wash things, hairbrush, toothbrush and toothpaste. You should also bring any medications that you take, like inhalers.

You must bring your mum, dad or carer with you.

What happens when we come for the operation?

You will have an appointment for the morning or the afternoon.

When you arrive at the Children's Ward, a nurse will ask you some questions and do some tests such as taking your:

- Blood pressure
- Heart rate
- Breathing rate

The nurse will put a wrist band on each of your wrists and put cream on the backs of your hands. This cream is sometimes called magic cream. It makes the back of your hands numb so that you do not feel any pain. It is used so that when the anaesthetist puts a cannula into your hand to give you the anaesthetic, you will not feel this being put in.

The surgeon will come and see you and explain the operation to you. If you want to have the operation, you will be asked you to sign a consent form. This means that you are giving your permission for the surgeon to do the operation. If you are under the age of 18, your parent/carer/guardian will have to sign it too.

The anaesthetist will come and see you to check that you are well enough to have the operation.

The surgeon has a lot of operations to do and so there is a list of these. The surgeon does the operations in the order on this list. The nurse will be able to give you a rough idea of the time you will have your operation. However, sometimes there are delays if operations take a bit longer than they thought.

If you have any questions or worries, please ask the nurse who is looking after you.

What happens when I go for the operation?

A nurse will take you to the anaesthetic room to have your anaesthetic. Your mum, dad or guardian (only one of them) can go with you to the anaesthetic room and stay with you until you are asleep. Nurses will be looking after you all the time that you are asleep.

What happens after the operation?

When you wake up, you will be in a recovery room with a nurse. When the nurse is happy that you have recovered, they will take you back to the Children's Ward to your mum, dad or carer.

You may still have a cannula in your hand when you go back to the ward. This can be used to give you medicine, if you need it. For example, some people feel sick after having a general anaesthetic.

If you feel sick, tell your nurse and we can give you some anti-sickness medicine. We will take the cannula out before you go home.

On the ward the nurse will check your heart rate, blood pressure and breathing rate again. They will also check if you are in any pain, and will be able to give you some pain medicine if you need any.

You may feel sleepy after your operation. The best thing to do is rest and sleep.

After the operation, you may have a bandage or plaster of Paris (plaster cast) in place to support to the bone. If the metal work is in your leg or ankle, you may need to use crutches. In this case, the physiotherapist will show you how to use them. They will also give you advice on any exercises you need to do, to help you recover from the operation.

When you are back on the Children's Ward, the nurse will give you a drink and some food, when you feel ready.

Will it hurt?

You could have pain for a couple of days after the operation. We will give you medicine to get rid of the pain (painkillers) while you are having your operation. This is so that when you wake up, you should not feel any pain.

We can also give you painkillers regularly when you get back to the Children's Ward, if you are in pain.

Your parent/carer is advised to make sure that they have painkillers at home ready for you. It is a good idea to have painkillers regularly, such as **Calpol**. You must always read the label on this medicine and not take more than it says you should.

If the pain does not go away after a few days, please speak to your family doctor or the Children's Ward. The number of the Children's Ward is:

01384 244271

When can I go home?

After your operation, you will need to be in hospital for least six to eight hours after the operation. You may need to stay for one night, if your hospital doctor thinks that is a good idea. Either your mum, dad or guardian can stay with you for the night.

After this time, you can go home when:

- You have eaten enough food and drink.
- You are not having any bleeding.
- You have had a wee.
- You are not being sick.
- You have a normal temperature.
- Your hospital doctor says you are well enough to go home.

When you do go home, it is best for you to travel in a car as on public transport (buses, trains, metro), you are more likely to get an infection.

What happens when I get home?

You will need to do any exercises given to you by the physiotherapist as these will help your recovery.

You may have stitches which dissolve, stitches that need to be taken out or staples. The nurse will tell you which type you have before you leave hospital.

If you have stitches or staples that need to be taken out, we will give you a letter to give to the nurse at your family doctor practice. Your parent or carer can use this letter to make an appointment at your family doctor surgery to have the stitches or staples removed. This is normally between seven to 14 days after the operation.

Please note that if you have staples, you will need to make sure you have a staple remover and dressing given to you when you leave hospital. Take these to the nurse at your GP surgery when you have the staples taken out.

If you have dissolvable stitches, it is best not to soak in the bath for a long time. This will weaken the stitches which will mean your wound will take longer to heal.

What should I look out for?

If you have of the following during the next few weeks:

- High temperature
- A lot of pain
- Being sick

You can get advice from the Children's Ward on 01384 244271, your family doctor or the Emergency Department.

Even if the wound looks fine, it could mean that you have an infection.

If you have bleeding and it will not stop, contact the Children's Ward on 01384 244271, your family doctor or go to your nearest Emergency Department.

When can I go back to school?

Your hospital doctor will tell you about this as it will depend on the type of metal work taken out and if you have a plaster cast on. If you have a plaster cast, you will need to get your parent or guardian to check with your school about their policy on this.

Follow up

If you need to see your hospital doctor again, we will give you an appointment before you leave hospital or send you one through the post.

If you have any questions, or if there is anything you do not understand about this leaflet, please contact:

Children's Ward on 01384 244271

Russells Hall Hospital switchboard number: 01384 456111

This leaflet can be downloaded or printed from:

<http://dgft.nhs.uk/services-and-wards/c2-childrens-ward/>

If you have any feedback on this patient information leaflet, please email dgft.patient.information@nhs.net

This leaflet can be made available in large print, audio version and in other languages, please call 0800 073 0510.

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Ulotka dostępna jest również w dużym druku, wersji audio lub w innym języku. W tym celu zadzwoń pod numer 0800 073 0510.

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Aceasta broșura poate fi pusă la dispoziție tipărită cu caractere mari, versiune audio sau în alte limbi, pentru acest lucru vă rugăm sunați la 0800 073 0510.

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