

I. <u>Personal datas:</u>
First name:
Last name:
Date of birth:
Insurance number:
Gender: female / male
Race: Asian-Indian / White / Black / N/A
Elapsed time between injury and admission to the hospital (hours):
The patient arrived by ambulance? Yes-no If yes, The affected limb (s) was (were) stabilized? Yes-no
Have the the patinet recieved painkillers? Yes-no-no data
If yes
Name of medication:  active substance:  dose:  unit: g / mg / IU /ml
Have the patient received parenteral solution? Yes-no-no data
If yes
iv fluid, concentration (e.g. 10%, 1g/2ml, etc.)
Method of administration: N/A / intravenious / oral / enteral / subcutan other notes:
II. <u>Medical history:</u>

Smoking (Firsthand): yes / no

if yes: amount (cigarettes/day):.....



pack/ year:for how many years?
Smoking(Secondhand):  Passive smoking is the inhalation of smoke, called second-hand smoke (SHS), or environmental tobacco smoket (ETS), by persons other than the intended 'active' smoker. It occurs when tobacco smoke permeates any environment, causing its inhalation by the children within that environment.  if yes: amount (cigarettes/day):
Smoking(thirdhand):  Thirdhand smoke clings to hair, skin, clothes, furniture, drapes, walls, bedding, carpets, dust, vehicles and other surfaces, even long after smoking has stopped. Infants, children and nonsmoking adults may be at risk of tobacco-realted health problems when they inhale, ingest or touch substances containing thirdhand smoke.  if yes: amount (cigarettes/day):
Osteogenesis – Yes, No
Others – Yes, No
If yes:
III. Diagnosis, Status, physical examination  III.1. Basic data
Body weight:
Body height:
BMI:
RR:
III.2. Physical examination of the injured limb(s)

III.2.1. Vascular



- O2 Saturation of the injured lim was measured: Yes, No

If yes: ..... (0-100)

- radial pulse was measured on the injured limb: Yes, No
  If Yes,
  - Palpable,
  - Not palpable with definite micro circulation (pulseless pink hand) PPH
    - US doppler
    - o CT angio
    - o no investigation
  - Not palpable with poor micro circulation (capillary refill time) CRT<3 sec (pulseless white hand) – PWH
    - o US doppler
    - o CT angio
    - o no investigation

#### III.2.2. Neural

- Examination of the hand: Yes, No

If yes,

- Can not be objectively evaluated due to pain
- Complete/Total function
- Radial nerve dysfunction
- Ulnar nerve dysfunction
- Median nerve dysfunction
- VAS score Yes/NO/ no data

#### IV. <u>Investigation</u>

- 1. Pre-operative/Primary X-ray examination AP, lateral
- 2. Pre-operative CT scan: yes, no



# V. <u>Classification</u>

- A, Flexion
- B, Extension
- 1. Without disposition
- 2. Disposition in one plane
- 3. Disposition whith rotation

Displaced fracture

VI.	Tl	h	e	ra	aı	ים	۷
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Operation: Yes, No

If no: kind of fixation: cust, Collar and cuff, orthesis, no fixation

#### If No

# VI.1. Outpatient therapy

Painki	ller: Yes, No, No data	
	Name of medication:	

Other therapy: Yes, No, No data

Name of medication:
active substance:
dose:

unit: g / mg / IU /ml

Method of administration: N/A / intravenious / oral / enteral / subcutan



### VI.2. Admission thearpy

	са. р у	
Painkiller: Yes, No	o, No data	
active sub dose: unit: g / m	ng / IU /ml	N/A / intravenious / oral / enteral / subcutan
Other therapy: Ye	es, No, No data	
active sub dose: unit: g / m	ng / IU /ml	N/A / intravenious / oral / enteral / subcutan
If yes		
VI.3. Preoperative	e data	
If yes: Surgery wa	as done by: Senior	specialist, junior, trainee
jur	nior: 10 years after	the specialisation
Elapsed time bety	ween admission to	the hospital and begining of operation (hours):
Praeoperative pa	inkiller: Yes/ No/ N	No data
active sub dose: unit: g / m	ng / IU /ml	N/A / intravenious / oral / enteral / subcutan
Praeoperative AB	3: Yes/ No/ No data	a a constant of the constant o
	medication: stance:	



unit: g / mg / IU /ml

Method of administration: N/A / intravenious / oral / enteral / subcutan

Praeoperative other therapy: Yes/ No/ No data

Name of medication:
active substance:
dose:
unit: g / mg / IU /ml

Method of administration: N/A / intravenious / oral / enteral / subcutan

#### VI.4. Operative data

#### Surgical positioning:

- Supine
- Prone

#### Type of fracture reduction:

- Closed
- Closed, then open due to signs of radial artery dysfunction
- Closed, then open due to other complications (f.e. difficulty of closed reduction)
- Closed with percutaneous tools for stabilisation (wire, pean, other istruments)
- Closed with joystick method (fixatere externe, wires)
- Primerly open, without trying closed reduction beforehand

#### Type of surgical approach:

- Ventral
- Radial
- Ulnar
- Multiple approach

### Any injury detected during the operation:

- None
- Brachial artery compression
- Injury of the intima
- Thromboses
- Rupture

If yes, the treatment was (multiple choice):



- Release of the artery
- Arteriotomy
- Fogarthy catheter
- Direct suturing
- Intima suturing
- Venous patch plasty
- Venous transposition

# Typeof fixation:

- Radial fixation both wires
- Distal cross wiring
- Radial cross wiring
- Fixterure externe
- ESIN (TEN, SanatPIN, STEN, intramedullar fixation)
- Screw osteosynthesis
- Plate osteosynthesis

#### Number of nails used:

- 1,
- 2,
- 3,
- 4,
- 5,
- 6.
- others

# Diameter of nails (mm):

- 1.2,
- 1,5
- 1,8
- 2,0
- 2.2
- 2,5
- others

### Duration of operation (minutes):



Intraoperative therapy Local anesthesia : Yes/NO/No data
Name of medication:
Name of medication:  active substance:  dose:  unit: g / mg / IU /ml  Method of administration: N/A / intravenious / oral / enteral / subcutan
VI.5. Postoperative data
<ul> <li>Post-operative stabilisation:</li> <li>No external fiaxation</li> <li>Dorsal 90° angle forearm plaster splint</li> <li>Dorsal 90° angle forearm plaster splint with 'U' shaped plaster splint</li> <li>Orthesis</li> </ul>
Postoperative investigation
<ol> <li>Prostoperative X-ray examination AP, lateral</li> <li>Postoperative CT scan: yes, no</li> </ol>
Postoperative drugs
Postoperative painkiller: Yes/ No/ No data
Name of medication:  active substance:  dose:  unit: g / mg / IU /ml



Method of administration: N/A / intravenious / oral / enteral / subcutan

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Postoperative AB: Yes/ No/ No data	
Name of medication:	 N/A / intravenious / oral / enteral / subcutan
Postoperative other therapy: Yes/ No	o/ No data
Name of medication:	 N/A / intravenious / oral / enteral / subcutan
Postoperative thrombosis profilaxis:	Yes/ No/ No data
Name of medication:	 N/A / intravenious / oral / enteral / subcutan

#### IV. Early (Intra, post. 24 h after op) complications

There was complication Yes/No/No data Vascular injury Yes/No/No data If yes, was there an immediate (within 24 hours) procedure? Yes/No/No data

Signs of median nerve dysfunction: Yes/No/No data

Ulnar nerve dysfunction: Yes/No/No data Radial nerve dysfunction: Yes/No/No data Ostegen comlication: Yes/No/No data

If yes, was there redo procedure? Yes/No/No data



Compartment syndrome: Yes/No/No data

Others

# **Admission therapy**

Painkiller: Yes, No, No data	
Name of medication:	N/A / intravenious / oral / enteral / subcutan
Antibiotics: Yes, No, No data	
Name of medication:	N/A / intravenious / oral / enteral / subcutan
Other therapy: Yes, No, No data	
Name of medication:	N/A / intravenious / oral / enteral / subcutan
Thrombosis profilaxis: Yes, No, No d	lata
Name of medication:	 N/A / intravenious / oral / enteral / subcutan