

# Date:

#### **Administrative data**

Were there any injuries in the past? Yes, No

If yes, What was it?

I. <u>Physical examination of the injured limb(s)</u>

#### I.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</li>
     (pulseless white hand) PWH
    - US doppler
    - o CT angio
    - o no investigation

### I.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

#### **Investigation**

Control in	ivestigation: Ye	s/No/No data
1. X-ra	ay examination	AP, lateral

2. CT scan: yes, no

**Complication: Yes/No/No data** 

Vascular Yes/No/No data

Neural Yes/No/No data

Osteogen Yes/No/No data

Yes: Rotation disorder Yes/No/No data

Redislocation Yes/No/No data

If Yes: Reoperation: Yes/No/No data

No reoperation:

- Removal of the external fixation Yes/No/No data

Reoperation:

### Preoperative data

If yes: Surgery was done by: Senior specialist, junior, trainee

junior: 10 years after the specialisation

Elapsed time between admission to the hospital and begining of operation (hours):

Praeoperative 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



### Praeoperative AB: Yes/ No/ No data

Name of medication:	
active substance:	
dose:	
unit: g / mg / IU /ml	
Method of administration:	N/A / intravenious / oral / enteral / subcutan
orative other thorany: Voc/I	No/No data

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

### 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		
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		
Prostoperative X-ray examination AP, lateral		
2. Postoperative CT scan: yes, no		
Postoperative drugs		
Postoperative painkiller: Yes/ No/ No data		
Name of medication:		

active substance:.....



tan
tan
tan
t

## 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

# **Admittion thearpy**

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 o	data
Name of medication:	 N/A / intravenious / oral / enteral / subcutan



Removal of the K-wire: Yes/No/No data

The date of the K-wire removal (week):

- 3 weeks
- 4 weeks
- 5 weeks
- 6 weeks
- 7 weeks

How was the K-wire remove: general anesthesia, local anesthesia