

Procedure Information Sheet – Calcaneal Fracture Fixation Surgery

Hosp No. : HKID No.:

Case No. :

DOB : M/F

Adm Date : Contact No.:

1. Introduction

- 1.1. Calcaneal fracture is one of the most common fractures of the foot.
- 1.2. The calcaneus is the lowest piece of bone in the foot and 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.
- 1.3. This surgery is a common procedure that can preserve the joint, reduce complications of a displaced fracture, at the same time allow rapid return of joint motion.

2. Procedural Preparation

- 2.1. Tests may be ordered including X-Ray or Magnetic Resonance Imaging (MRI) of ankle, blood tests, Chest X-Ray and Electrocardiogram (ECG).
- 2.2. The reason of operation, procedure and possible complications will be explained by the surgeon and consent form will be signed before operation.
- 2.3. Pre-operative anesthetic assessment will be performed. The anesthetic management and its possible risks will be explained by the anesthetist with consent for anesthesia signed.
- 2.4. Inform doctor for any drug allergy, regular medications or other medical conditions, such as hypertension, diabetes mellitus, asthma.
- 2.5. Do not eat or drink for 6 to 8 hours before operation if under general anesthesia.
- 2.6. Check with your surgeon regarding prescription medications and herbal medications that you may be taking.
- 2.7. Do not take blood-thinning agents for a few days prior to the surgery.
- 2.8. Prophylaxis antibiotics may be prescribed.

3. Procedure

- 3.1. The operation will be performed under general anesthesia.
- 3.2. The surgeon will reduce the fracture by fixing with screws or plate internally.
- 3.3. It commonly uses a lateral approach, an open reduction and internal fixation.
- 3.4. If there is significant bony defect, you may require bone grafting.

4. Recovery Phase

- 4.1. Elevation of the operated leg above heart level is encouraged to reduce swelling and pain.
- 4.2. The wound should be kept clean and dry.
- 4.3. After the operation, you usually need crutches for non-weight bearing walking for 6 weeks according to surgeon's instruction.
- 4.4. Ankle and subtalar joint exercise will be started.
- 4.5. For implant removal, it should be considered in individual situations. It should be done after the fracture has fully healed.
- 4.6. High-stress activities should be avoided for a number of weeks.

5. Possible Risks and Complications

- 5.1. There are complications that relate to surgery in general. These include the risks associated with anesthesia, infection, damage to nerves and blood vessels, and bleeding or blood clots.
- 5.2. There are risks related to the fracture itself, such as non-union, mal-union, joint stiffness, and post-traumatic osteoarthritis.
- 5.3. It may cause wound complications, nerve injuries, complex pain syndrome and problems with implants including loosening or exposure.



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6. Remark

6.1. 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.

7. References

- 7.1. Hospital Authority. Smart Patient Website: Calcaneal Fracture Fixation Surgery.
- 7.2. American Orthopedic Foot & Ankle Society. Calcaneal Fracture Fixation Surgery.

I acknowledged the above information concerning the operation or procedure. I have also been given the opportunity to ask questions and received adequate explanations concerning the condition and treatment plan.

Patient/ Relative Signature:	
/	
Patient/ Relative Name:	
Date:	



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