OPERATIVE NOTE FOR DISTAL FEMUR FRACTURE

ภาควิชาออร์โธปิดิกส์ โรงพยาบาลเชียงรายประชานุเคราะห์

Date of Operation Time started Time ended Time
Surgeon Second Assistant Second Assistant
Scrub NurseCirculate Nurse
Clinical Diagnosis: ☐ Closed fracture distal femur :☐ left, Classification ☐ 33A3 ☐ 33B3
□ Open □ right □ 33C2 □ 33C3
Post-Operative Diagnosis: ☐ Closed fracture distal femur :☐ left Classification ☐ 33A3
☐ Open ☐ right ☐ 33B3 ☐ 33C2 ☐ 33C3
Operative Procedure: Open reduction, and internal fixation with Distal femoral LCP
Brand of LCP Holes, Standard screws, Locking screws
AnesthesiaAnesthetist
<u>Description of Operation</u>
Position: Supine
Incision: Lateral Anterior midline: lateral parapatellar arthrotomy
Finding: Comminuted fracture extra-articular distal femur
☐ Comminuted fracture intra-articular distal femur with
☐ 2 fragments articular ☐ 3 fragments articular ☐ 4 fragments articular
Procedure:
- Pt was supine position c Bump beneath knee and buttock
- \square Lateral / \square Anterior midline c lateral parapatellar approach was done.
- Clean and identified fracture site.
- Clean and identified fracture site D Reduced articular block until anatomic position then temporary K-wire fixation and
inserted lag screws until stable fixation.
 Placed LCP at articular block and shaft in proper position and temporary fixed c K- wire/drill bit.
- Reduced articular block to shaft under fluoroscopy until acceptable alignment.
- Inserted locking screws until stable fixation then removed K-wires.
- Performed bone grafting/HA at voids or fracture gap.
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- Surgical wound was irrigated.
- Drain was placed and joint was close. Manipulated knee in full ROM.
- Skin was closed by Nylon Staple
- Complication: None
Tissue sent for pathology: ☐ Yes ☐ No
Estimate Blood Loss ml Doctor's signature
Wound classification: :□ Clean □ Clean contaminate □ Contaminated □ Dirty
ติด Sticker ผู้ป่วย