REMOVAL OF METAL



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The metal removed would have been discussed with your surgeon already. This may be routine removal such as a diastasis screw in an ankle or plates in a foot, prominent metal-ware such as fibula plate or foot screw, or as part of a procedure such as a revision fusion.

RISKS OF REMOVAL OF METAL

Removal of metal is usually routine however very occasionally, the metal such as a screw is broken at the time of removal. If the broken metal-ware is located inside the bone, and it otherwise wouldn't cause any mechanical problems, it would usually be left inside the bone. Otherwise, the bone would have to be re-broken to removal it.

If the broken metal is likely to cause irritation if left inside the bone, then all efforts will be made to remove the metal despite the risk of re-fracture. If this is the case, the recovery can be more prolonged.

In general, once the metal is removed, any screw holes in the bone will need to "fill in" and will take around 6 weeks to do so. It is advisable not to impact load ie jump on the affected limb to minimise risk of fracture through the screw hole.

CAN THE PROCEDURE BE DONE AS A DAY CASE?

Yes. A routine removal of metal is usually as a day case. If its part of a larger operation, most likely you will be kept in hospital overnight.

POST-OEPRATIVE INSTRUCTIONS

You can go home when comfortable with any post operative pain and recovered from your anaesthetic. It is advisable to rest and elevate your foot for 1-2 weeks until your wound review.

If you have had a diastasis screw removed, you can weight bear *without* your moon boot and use your crutches if required for 1-2 wks. After day three, the middle layer of your bandage can be removed to debulk the dressing. Leave the sticky dressing on the skin and reapply the stocking (tubigrip) over the top of the sticky dressing. If the sticky dressing comes off or is blood soaked, carefully removed and apply a small bandaid over the top of the wound which usually has blue skin sutures which you leave in tact.

For other wounds, leave your dressing all in tact and dry until your wound review but you may weight bear as tolerated.

This brochure is a brief overview of corticosteroid injections and not designed to be all-inclusive. If you have any further questions, please do not hesitate to contact your surgeon.