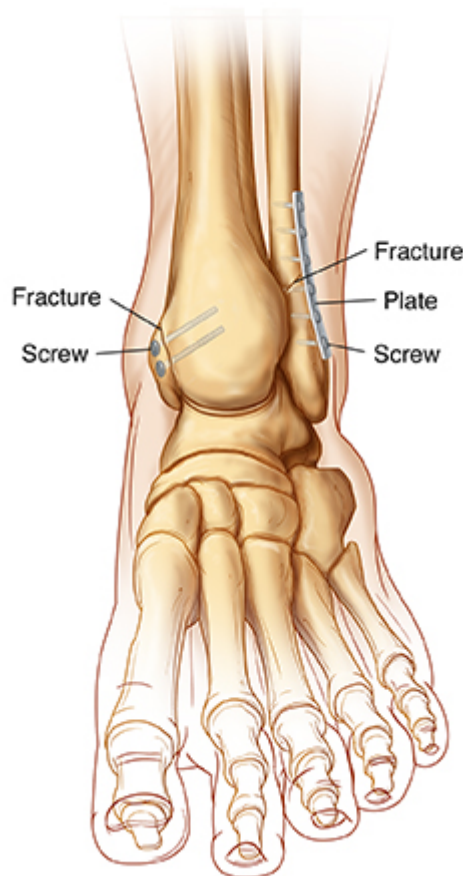


Having Ankle Fracture Open Reduction and Internal Fixation (ORIF)



Open reduction and internal fixation (ORIF) is a type of treatment to fix a broken bone. It puts the pieces of a broken bone back together so they can heal. Open reduction means the bones are put back in place during a surgery. Internal fixation means that special hardware is used to hold the bone pieces together. This helps the bone heal correctly. The procedure is done by an orthopedic surgeon. This is a healthcare provider with special training in treating bone, joint, and muscle problems.



What to tell your healthcare provider

Make sure you tell your provider about all the medicines you take. This includes prescription and over-the-counter medicines, such as aspirin. It also includes any vitamins, herbs, and other supplements you take. Tell the provider the last time you had something to eat or drink. Also tell your provider if you:

- Have had any recent changes in your health, such as an infection or fever
- Are sensitive or allergic to any medicines, latex, tape, or anesthetic medicines (local and general)
- Are pregnant or think you may be pregnant

Tests before your surgery

You may have an X-ray or a CT scan to look at your ankle.

Getting ready for your surgery

ORIF often takes place as emergency surgery after an accident or injury. Before this procedure, a healthcare provider will ask about your health history and give you a physical exam.

In some cases, ankle fracture ORIF is planned. Your surgery may be done after the swelling in your ankle has gone down. You might need to have your ankle held in place while you wait for your surgery. Talk with your healthcare provider about how to get ready for your surgery. You may need to stop taking some medicines, such as blood thinners and aspirin, before the procedure. If you smoke, you may need to stop before your surgery. Smoking can delay healing. Talk with your provider if you need help to stop smoking.

Also, make sure to:

- Ask a family member or friend to take you home from the hospital. You can't drive yourself.
- Arrange for someone to help you at home.
- Follow any directions you're given for not eating or drinking before surgery.
- Follow all other instructions from your provider.

You'll be asked to sign a consent form that gives your permission to do the procedure. Read the form carefully. Ask questions if something isn't clear.

On the day of surgery

Your surgeon will explain the details of your surgery. These details will depend on where your injury is and how serious it is. An orthopedic surgeon with a team of specialized nurses will do the surgery. The preparation and surgery may take a couple of hours. In general, you can expect the following:

- You'll likely have general anesthesia. This is medicine to prevent pain and make you sleep through the surgery. Or you may have local (regional) anesthesia to numb the area and medicine to help you relax and sleep through the surgery.
- A provider watches your vital signs, like your heart rate and blood pressure, during the surgery.
- After cleaning the skin, your surgeon will make a cut (incision) through the skin and muscle of your ankle.
- The surgeon will put the pieces of your ankle bones back into alignment (reduction).
- The pieces of the broken bones will be secured to each other (fixation). Your surgeon may use screws, metal plates, wires, or pins.
- Other repairs are made to the area as needed.
- The layers of muscle and skin around your ankle will be closed with stitches (sutures) or staples.

After your surgery

Talk with your surgeon about what you can expect after your surgery. You may go home the same day. Or you may stay overnight in the hospital. Before leaving the hospital, you'll likely have X-rays taken of your ankle. This is to check the repair.

You'll have some pain after the surgery. Your surgeon will tell you what pain medicine you can take to help reduce the pain. Don't take certain over-the-counter medicines for pain, as instructed. Some of these may interfere with bone healing. You can also use ice packs to help reduce pain and swelling. To make an ice pack, put ice cubes in a plastic bag that seals at the top. Wrap the bag in a clean, thin towel or cloth. Never put ice or an ice pack directly on the skin.

You may be told to keep your ankle raised for a period of time after your surgery. You'll also need to not move your ankle for a while. Often this means wearing a brace, cast, splint or boot, perhaps for several weeks. You'll get instructions about how to move your leg and when you can put weight on it. Your surgeon may also tell you to eat foods high in calcium and vitamin D to help with bone healing. You may need to take medicine (blood thinner) to prevent blood clots for a little while after your surgery. Follow all your surgeon's instructions carefully.

Follow-up care

Go to all of your follow-up appointments. You may need to have your stitches or staples removed a week or so after your surgery.

You may have physical therapy to improve the strength and movement of your ankle. The therapy may include treatments and exercises. The therapy improves your chances of a full recovery. Most people are able to return to all their normal activities within a few months.

When to call your healthcare provider

Call your provider right away if you have any of these:

- Fever of 100.4°F (38°C) or higher, or as directed by your provider
- Chills
- Redness, swelling, or fluid leaking from your incision that gets worse
- Pain that gets worse
- Loss of feeling in your foot or leg

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