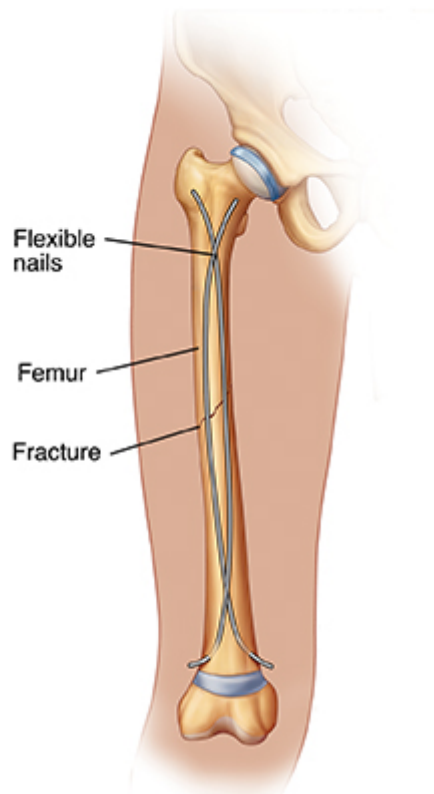


Having Femur Fracture Open Reduction and Internal Fixation (ORIF)



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 doctor with special training in treating bone, joint, and muscle problems.



What to tell your healthcare provider

Tell your provider about all the medicines you take. This includes prescriptions and over-the-counter medicines, such as ibuprofen. It also includes vitamins, herbs, and other supplements. 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, or tape
- Are sensitive or allergic to anesthesia, the medicines used to put you to sleep during surgery or to numb the surgery area
- Are pregnant or think you may be pregnant

Tests before your surgery

You may need an X-ray or a CT scan to look at your femur.

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, femur fracture ORIF is planned. You may need to have your leg placed in traction while you wait for surgery. Traction is a type of sling that holds your leg. Talk with your provider about how to prepare 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.
- Plan some changes at home to help you recover. Arrange for someone to help you at home after the surgery.
- Don't eat or drink after midnight the night before your surgery.
- Follow all other instructions from your provider.

You will be asked to sign a consent form that gives your permission to do the surgery. 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 bad 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 will prevent pain and make you sleep through the surgery. Or you may have local 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 thigh.
- The surgeon will put the pieces of your femur back into line correctly (reduction).
- The surgeon will secure the pieces of the broken bones to each other (fixation). They may use screws, metal plates, wires, or pins. For a fracture in the middle of your femur, a special metal rod may be put through the middle of the bone. It screws into the bone at both ends.
- The surgeon will make other repairs to the area as needed.
- The surgeon will close the layers of muscle and skin around your thigh with stitches (sutures), staples, or by other means.

After your surgery

Talk to your surgeon about what you can expect after your surgery. You may stay one or more nights in the hospital. Before leaving the hospital, you'll likely have X-rays taken of your femur. 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. Avoid certain over-the-counter pain medicines as instructed. Some of these may interfere with bone healing. You can also use ice packs to help lessen pain and swelling.

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 called a blood thinner for a little while after your surgery. Blood thinners stop blood from clotting or clumping together. Follow all your surgeon's instructions carefully.

Follow-up care

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

You may have physical therapy to improve the strength and movement of your leg. 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. A femur fracture can take 4 to 6 months to heal fully, but you should be able to go back to many activities before then.

When to call your healthcare provider

Call your provider if you have any of the following:

- 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 in your leg or calf that gets worse
- Loss of feeling in your foot or leg

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