

# Trauma & Orthopaedics

K-wire removal

Patient Information Leaflet



## Introduction

This information has been produced to give general information and advice to patients (or their parents / carers) who are having K-wires removed. Most of your questions should be answered by this leaflet. This Information leaflet is not intended to replace the discussion between you and your doctor. If after reading it you have any concerns or require further explanation, please discuss this with a member of the healthcare team caring for you.

#### What are K-Wires?

K- Wires, also known as Kirschner wires, are surgical wires that are used to hold bones in a corrected position following surgery. The K-wires are left prominent out of the skin so that they can be easily removed once the bone has healed. They are covered with a dressing and a plaster cast and you / the patient will not be able to see them; alternatively they may be exposed out of the toe/finger. The wires are normally removed after about four to six weeks. The K-wires can usually be removed in the Outpatient Department.

# How to prepare for K-Wire removal?

Prior to your clinic appointment we recommend you / the patient takes some simple pain relief (e.g. paracetamol). Etonox (gas and air) may be used for pain relief in the Outpatient Department. The nurse will explain how to use this.

Soft casts can be removed simply by unwrapping or using scissors; hard casts can be removed with a plaster cutting machine. This machine is designed to split the hard outer cast; it vibrates and is quite noisy but doesn't cut through soft padding of plaster.

## Removal of the K-Wires

The dressings around the K-wires will be removed and skin cleaned before the K-wires are removed using special pliers. This procedure is quick and may feel strange, but is not usually too uncomfortable.

The small wounds may bleed a little and dressings will be applied over these small wounds. Dressing needs to be kept completely dry. You / the patient will be advised how long these dressings should stay on, or if you need further dressings. The injured bone should be healing and the discomfort from the K-wire removal should settle within a few hours. We recommend you / the patient continues with simple pain relief as required.

## **Possible Problems**

Sometimes a local anaesthetic injection may be given to mumb the area if the wires are very deep. If it is not possible to remove K-wires in the Outpatient Department, a date will be arranged for you / the patient to come into hospital (Day Surgery Unit) for the K-wires to be removed under a general anaesthetic.

# Removal of K-wires under general anaesthetic (for Children)

In young children the wires are taken out as a day case procedure. Your child will need a general anaesthetic for this but will not need to stay in hospital overnight. A letter will be sent to you confirming the date, time and location of the procedure. Your child will not be able to eat or drink for some time before they come into hospital and details of this will be included in the letter. After the wires have been taken out your child will go back to the ward. They will usually have another plaster cast, a splint or a bandage put on to support the limb. Your child will be able to go home the same day and will be followed up in clinic, as required.

#### Aftercare

If required, a further plaster cast may be applied for a few more weeks and an outpatient appointment made for the plaster cast to be removed. At this appointment, you / the patient will be provided with information sheet on physiotherapy/exercises or referred for formal physiotherapy. Children should not play contact sports for 4-6 weeks after removal of the cast.





You Tube Please visit our YouTube channel to access some of our fracture patient information videos



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