

Closed Reduction of Dislocation/ Fracture

General Information

Closed reduction is a non-surgical procedure to reduce a dislocated joint or a displaced fracture part of a patient. The aim of closed reduction is to restore the dislocated joint to its normal anatomical position and to improve the alignment of a displaced fracture. Common indications for closed reduction include shoulder dislocation, elbow dislocation, patellar dislocation, finger dislocation and distal radius fracture.

Procedure

Patient who undergoes closed reduction will receive conscious procedural sedation before the procedure. Sedative drug(s) and analgesics will be given intravenously to the patient to induce a depression of consciousness. Alternatively local anesthesia will be given in certain suitable patients. Medical staff will then proceed to closed reduction by applying traction and counter-traction or other reduction method(s) to reduce the dislocated joint into its normal anatomical position or to improve the alignment of a displaced fracture. Plaster or splint will be applied to the dislocated or fractured part in appropriate patients. Patient will be closely monitored until full consciousness is regained.

Potential Risks and Complications (include common and important risks; not exhaustive)

- Failed reduction
- Need of subsequent procedures/operations
- Fracture
- Nerve, vessel or other soft tissue injuries
- Adverse effects of sedating and anesthetic agents including allergy, hypotension, foreign body aspiration, respiratory failure, arrhythmia, death in severe case

Remarks

This is general information only and the list of complications is not exhaustive. Other unforeseen complications may occasionally occur. In different patient groups, the actual risk may be different. For further information, please contact your doctor.