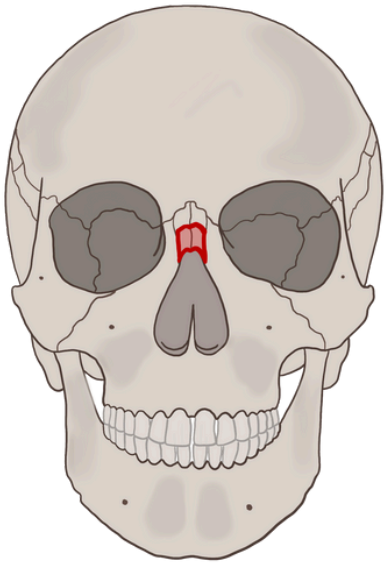
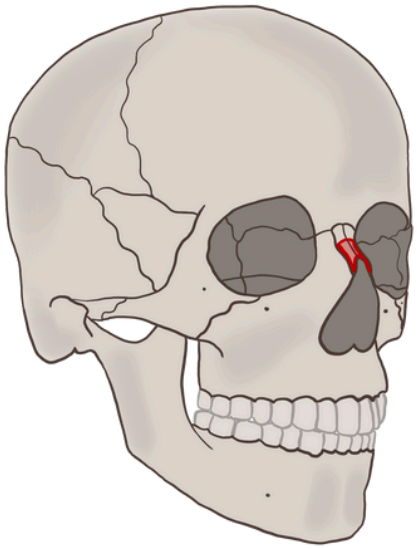
ONTARIO ASSOCIATION OF CRANIOFACIAL TRAUMA SURGEONS

(OACTS)

NASAL FRACTURE





What is it?
Fracture in the nasal bone over the bridge of the nose

How does it happen?
A blunt, directed force (e.g., vehicle collision, sports, fall, trauma)

Signs of a nasal fracture:

- nose deformity (new after injury)
- swelling of nose
- laceration at nose
- nosebleeds
- grating sensation under nose tissue (crepitus)
- pain
- deviated septum (new after injury)
- septal hematoma (blood collection at septum of nose)

How is it diagnosed?
Clinical diagnosis, no imaging required

Indications for surgery

1. Restore normal contour of nose and fix any displacement
2. Resolve any airway obstruction
3. Septum is deviated and initial treatment has not fixed the deformity

Risks of surgery

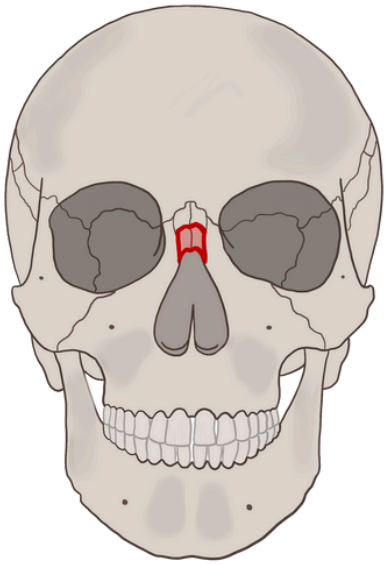
- Facial asymmetry, poor cosmetic result
- Infection, abscess
- Bleeding
- Scarring
- Anosmia (loss of smell)
- Sensory damage
- Septal deviation/perforation
- Saddle-nose deformity

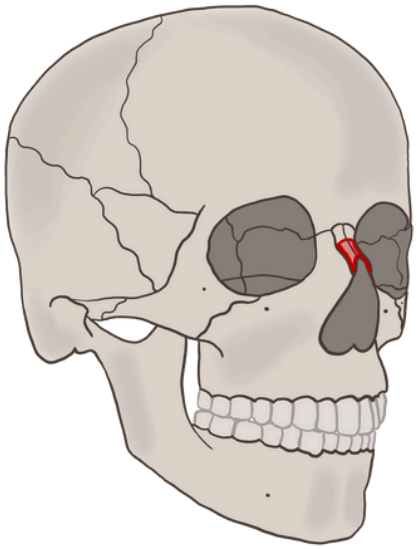
*Smoking and alcohol use are associated with a higher rate of complications.

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Surgical Incisions to Expect

Every fracture and incision is different, surgical type and exposure will depend on each unique patient fracture.

Please speak to your surgeon to gain a better understanding of what to expect.

Typical incisions include:

- hidden in nose
- at the septum

If your injury involved a cut on your face, it may be used to surgically expose the fracture. If you have sustained other fractures at the same time, incisions may differ.

Tips Before Surgery

Surgery is typically done within 1-2 weeks if there is no indication for emergent surgery. You'll be placed on sinus precautions.

Sinus precautions include:

- Avoid blowing your nose: this can cause your fracture to increase in size and can cause worsening swelling
- Sneeze only with your mouth open and avoid pinching your nostrils
- Do not use a straw to drink, drink directly from a cup
- Keep the head of your bed elevated at 30°: this will help reduce swelling

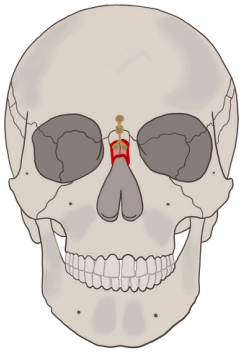
Present to the emergency room if you have clear fluid leaking from nose/eyes, uncontrolled bleeding, or fever over 38°C.

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NASAL FRACTURE

POST-OPERATIVE CARE



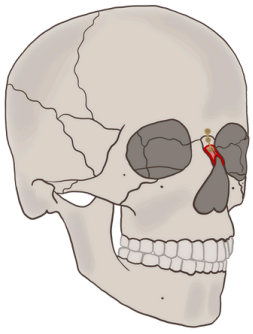
Treatment

Surgical Management

- If uncomplicated/stable: may not need surgery, can just be reduced externally
- If complicated/unstable: surgical reduction, possible septorhinoplasty to open airway and resolve any septal defects
- Septal hematomas must be evacuated to prevent necrosis of the nasal cartilage, necrosis can lead to a saddle-nose deformity or a hole in the septum
    - Evacuation is done by making small cuts in cartilage lining then suturing it together

Non-Surgical Management

- Splints and nasal packing may be required which will be removed in 48 to 72 hours once the nose has been rechecked
- You will be kept upright after surgery to decrease pain and swelling



Medications

- Pain management: acetaminophen, NSAIDs, and/or opioids as prescribed
- Antibiotics: usually given during surgery
- Sore throat/nasal congestion: over-the-counter nasal decongestant (e.g., Benadryl)

Diet

- Typically the diet is normal immediately post-operatively
- Depending on patient condition and extent of injury, a soft diet may decrease face pain while chewing

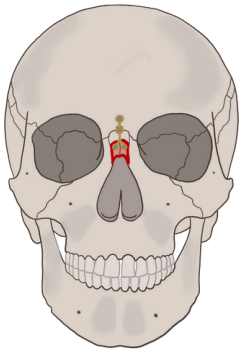
If you have sustained other fractures at the same time as your nasal bone fractures, you should consult the corresponding handout for any diet restrictions.

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NASAL FRACTURE

POST-OPERATIVE CARE

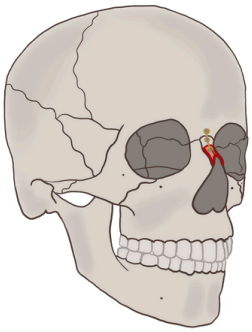


Activity

- Physical activity should be kept to a minimum for at least 2 weeks after surgery
- Contact or other sports should be avoided for 2–3 months to minimize the risk of another fracture
- Be cautious with kids and animals for 6-8 weeks (avoid rough play, risk of re-injury)
- No nose blowing for at least 2 weeks following surgery

Wound Care

- For the first 48 hours after surgery, use ice packs to help minimize swelling
- Sutures likely absorbable, but in event that they are not, they will be removed 5 days after surgery
- If applicable, surgical tapes will be removed within 5-7 days
- Shower normally, if surgical tapes are used, you can shower but pat them dry
- You may start showering after your surgery unless if instructed by your surgeon to do otherwise
- Avoid sun as much as possible to prevent darkening of the scar (e.g., hat, sunscreen, sunglasses when in sunlight) for at least 1 year



Seek care if you experience:

- Fever over 38°C
- New redness
- Swelling
- Pus or oul odour discharge
- Clear fluid or blood running from nose

Please contact your surgeon or present to nearest emergency department.