



Closed Reduction Nasal Fracture

Patient and Family Education

This teaching sheet contains general information. If you have any additional questions, please speak with the office nurse at (813) 262-1330.

What is a closed nasal reduction?

When a nasal fracture occurs the nasal bones may be displaced out of the normal anatomic position or alignment. If the nasal bones are left in this position they will set and heal as a crooked nose. A reduction of a nasal fracture is a procedure where the nasal bones are repositioned in a straighter more natural anatomic alignment.

How long will it take to recover?

Most children require pain medication by mouth for a few days post-surgery. Increased snoring and nasal congestion is normal and is caused by temporary swelling. It is normal to have some mild bloody drainage for the first 1-2 days after this outpatient surgery. Physical activity is limited for at least 1-2 weeks after surgery.

What are the risks of a reduction of a nasal fracture?

The most common complication after closed reduction of a nasal fracture is unsatisfactory appearance of external nose or longstanding nasal congestion. The front part of the nasal septum is made of cartilage. Cartilage is said to have "memory" and can sometimes return to its twisted shape despite the surgery leading to a deviated septum and difficult breathing through the nose. This often can be repaired in a subsequent procedure if warranted called septoplasty. Every effort will be made to restore your child's nose to its former appearance, but as fractured bones are still mobile the body goes through a healing process which can alter the shape and appearance of tissues as they heal. Often, the surgeon will place a cast over the nose to help reduce swelling and prevent inadvertent movement of the bones until the fractured bone segments set or heal.

How can I take care of my child after surgery?

1. Pain- Most children are back to normal within 7 days after surgery. If uncomfortable, please give Tylenol (Acetaminophen) every 4-6 hours or Motrin (Ibuprofen) every 6-8 as needed for pain.
2. Congestion-It is normal to feel very congested after surgery. You may use nasal saline to help moisten the nose. We do not recommend blowing the nose or "picking" the nose while healing though you may use light wiping as needed.
3. Fever- A low grade fever less than 101° F may occur after surgery and may be treated with Tylenol (Acetaminophen) every 4-6 hours as needed.
4. Bleeding- There may be some bloody drainage for the first 1-2 days after surgery. There should be no excessive nose bleeds. Afrin nasal spray helps reduce any bleeding.
5. Nasal Splint/Cast: The splint must be kept dry to prevent it from loosening and falling off too soon. It typically remains in place for 5-7 days.
6. Activity- It is best for your child to rest at home the day of surgery. Try to keep his/her head elevated for the first 24 hours after going home. Discourage your child from blowing their nose. She/he may resume normal activities, including school 1 week after surgery. No vigorous activity or PE for 2 weeks post-surgery.
7. Post-Op Appointment- A follow up appointment should be made in our office for 7 days post-surgery to remove splint/cast. Please call if not already scheduled.

When should I call the doctor?

Call the office if your child:

- Excessive nose bleeding
- Has a temperature over 102° F
- If fevers persist more than 12 hours post-surgery and does not respond to tylenol
- Persistent headache
- If you have any concerns about how your child looks or feels

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