Manipulation under Anaesthetic (MUA) of Fractured Nasal Bones, in Children

Children’s Outpatient Department
Women & Children’s Services

This leaflet has been designed to give you important information and to answer some common queries that you may have.
**Information for patients and visitors**

**Introduction**

Trauma to the nose may cause a fracture or dislocation of the nasal bones. It will cause swelling and possibly deformity to the nose. There may be some nasal blockage, making it harder to breathe through the nose and to clear nasal secretions.

The injury should be reassessed about a week after the injury, by an ENT doctor, when the swelling has settled. The ENT doctor will decide if the nasal bones are fractured and whether any surgery is needed.

Fractured nasal bones heal about 2-3 weeks following the trauma. The best time to try and manipulate (straighten) fractured nasal bones is in the second week following the injury.

The procedure is a day case and you should expect to stay in the hospital on the Children’s Ward for a morning or for an afternoon.

The information leaflet will also assist you in caring for your child once discharged home.

**Benefits**

MUA of fractured nasal bones has 2 benefits:

- To straighten the nose and improve cosmetic appearance
- To correct nasal obstruction caused by deformity

The success rate of a simple manipulation under anaesthetic of fractured nasal bones is between 85-95%.

**Risks**

Occasionally bleeding from the nostrils can occur from the nose following MUA. This may lengthen your child’s stay in hospital.

Even the most careful manipulation can result in an unsatisfactory cosmetic result. Formal corrective surgery may be necessary at a later date.

The anaesthetic may cause nausea and vomiting, medication can be given by the anaesthetist to help reduce this.

Swelling and bruising, should slowly settle over a period of 6 six weeks following surgery.

**Alternatives**

Where there is no obstruction to nasal airflow as a result of nasal deformity, nasal fracture may be left untreated as long as the cosmetic appearance is considered to be acceptable.

**What happens to my Child when we arrive on the Children’s Ward?**

Please make sure that your child has not had anything to eat or drink in accordance with the fasting instructions on your letter.

Please arrange your own transport to and from hospital. Do not use public transport to take your child home after the operation. If you have any problems getting to or from hospital for the appointment arrangements can be made with hospital transport.

You should arrive on the Children’s Ward at the time stated on your letter.

A nurse will admit your child onto the ward. The nurse will check personal details and measure and record your child’s pulse, temperature, oxygen saturations, blood pressure and weight.

Please tell the nurse if anything has changed in your child’s health or circumstances since pre-assessment. Please inform the nurse if...
your child has had recent illness or you believe them to be unwell.

A nurse will put topical local anaesthetic to the back of your child’s hands. A clear transparent dressing will be applied over the cream. This will numb the area of skin where your child will be cannulated, unless otherwise instructed.

Your child will be seen by an anaesthetist, he is a doctor specially trained to administer an anaesthetic and monitor your child during the operation. The anaesthetist is a specialist in pain management.

Your child will be given a hospital gown to wear. They can keep their pants on, if made from cotton.

A play specialist may also talk to your child to find them toys to play with and to reduce any anxiety your child and yourself may have.

**Procedure and Anaesthetic**

Your child will be given a general anaesthetic for the procedure.

The nose will be manipulated (pushed) back into a satisfactory position. It only takes a few minutes.

An external splint may be applied to the nose to ensure it stays in the correct position. This will be fixed in place with a surgical tape. If a splint is applied it should remain in place for approximately 1 week. You will be told when it is safe to remove it.

After the operation your child will need time to wake up and will stay in the recovery room for a short time. They will be away from the ward for about an hour.

**Discharge Home**

Your son / daughter should be discharge on the same day as the operation.

Your child’s nurse will keep you updated of their recovery and when you can expect to go home. If you have any concerns you should speak with your child’s nurse.

A follow up appointment is not usually necessary. However if the surgeon wishes to see you an appointment will be arranged before your child goes home.

You should receive a discharge letter prior to being discharged home. This will also be sent to your child’s GP to inform them that your son / daughter has had an operation.

**Care at Home**

The operation will result in a blocked nose and sore throat. The soreness may last up to a week. Please give your child regular pain relief. Paracetamol and Ibuprofen will be sufficient.

Forceful nose blowing should be avoided for at least one week to avoid bleeding. You should discourage your child from picking their nose.

Your child may feel tired for the first few days. We advise that your child takes plenty of rest and sleep and gradually returns to normal levels of activity.

If your child has any fresh / profuse (lots of) bleeding from their nose, return immediately to A&E for assessment or call an ambulance.

Children should be kept off school with adult supervision for one or two days after the procedure.

Contact sports should not be played for 6 weeks following the surgery.
Information for patients and visitors

Reference Section

Contact Details for Further Information

For Diana Princess of Wales Hospital
Children’s pre-assessment team, Children’s Outpatient Department, Diana Princess of Wales Hospital, Grimsby.
Telephone: 01472 874111 ext. 2599

Rainforest Ward
Telephone: 01472 875314 or 01472 874111 ext. 7520.

For Scunthorpe General Hospital
Children’s pre-assessment team, Children’s Outpatient Department, Scunthorpe General Hospital, Scunthorpe.
Tel: 01724 282282 ext. 2027

Disney Ward
Tel: 01724 282282 ext. 2553

Concerns and Queries
If you have any concerns / queries about any of the services offered by the Trust, in the first instance, please speak to the person providing your care.

For Diana, Princess of Wales Hospital
Alternatively you can contact the Patient Advice and Liaison Service (PALS) on (01724) 290132 or at the PALS office which situated on C Floor.
Alternatively you can email: nlg-tr.PALS@nhs.net

Confidentiality
Information on NHS patients is collected in a variety of ways and for a variety of reasons (e.g. providing care and treatment, managing and planning the NHS, training and educating staff, research etc.).

Everyone working for the NHS has a legal duty to keep information about you confidential. Information will only ever be shared with people who have a genuine need for it (e.g. your GP or other professionals from whom you have been receiving care) or if the law requires it, for example, to notify a birth.

Please be assured however that anyone who receives information from us is also under a legal duty to keep it confidential.

Zero Tolerance - Violent, Threatening and Abusive Behaviour
The Trust and its staff are committed to providing high quality care to patients within the department. However, we wish to advise all patients / visitors that the following inappropriate behaviour will not be tolerated:
- Swearing
- Threatening / abusive behaviour
- Verbal / physical abuse

The Trust reserves the right to withdraw from treating patients whom are threatening /
Information for patients and visitors

abusive / violent and ensuring the removal of those persons from the premises.
All acts of criminal violence and aggression will be notified to the Police immediately.

Risk Management Strategy
The Trust welcomes comments and suggestions from patients and visitors that could help to reduce risk.

Perhaps you have experienced something whilst in hospital, whilst attending as an outpatient or as a visitor and you felt at risk.

Please tell a member of staff on the ward or in the department you are attending / visiting.

Moving & Handling
The Trust operates a Minimal Lifting Policy, which in essence means patients are only ever lifted by nursing staff in an emergency situation.

Patients are always encouraged to help themselves as much as possible when mobilising, and if unable to do so, equipment may be used to assist in their safe transfer.

If you have any questions regarding moving and handling of patients within the Trust, please speak to a member of staff in the ward or department you are visiting.

Northern Lincolnshire and Goole NHS Foundation Trust
Diana Princess of Wales Hospital
Scartho Road
Grimsby
DN33 2BA
01472 874111

Scunthorpe General Hospital
Cliff Gardens
Scunthorpe
DN15 7BH
01724 282282

Goole & District Hospital
Woodland Avenue
Goole
DN14 6RX
01405 720720

www.nlg.nhs.uk

Date of issue: November, 2016
Review Period: November, 2019
Author: Children’s Outpatient Department Pre-Assessment Team
IFP-933
© NLGHT 2016

For more information about our Trust and the services we provide please visit our website: www.nlg.nhs.uk