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In those necessitating operative repair, precise surgical dissection and adequate fracture reduction are essential to restoring orbital anatomy and function. Novel surgical techniques and orbital floor reconstruction materials, described in

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this review, will further optimize patient outcomes.

## **Contemporary management of orbital blowout fractures.**

A bone fracture is usually treated with a cast and/or splint. A cast or splint will immobilize the bone (keep it from moving) in order to encourage the bones to align (straighten) and to



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prevent use of the bone. In some cases when the bone is small (toes or fingers), no cast is needed and the fracture is immobilized by wrapping.

## **Bone Fractures Management and Treatment | Cleveland Clinic**

Modern treatment options include internal fixation using tension bands with Kirschner wires or cannulated

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screws, lag screw fixation, partial patellectomy, and rarely total patellectomy.

Nondisplaced, closed patellar fractures or fractures with less than 2-mm articular steps can be successfully treated conservatively.

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traumatic orthopaedic complaints can be summarized into 'Reduce - Hold - Rehabilitate' Reduction will often be performed by orthopaedic specialist, with the aim to restore the anatomical alignment of a fracture or dislocation Fractures will need immobilization +/- traction to ensure successful healing

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## **Principles of Fracture**

### **Management - Reduce - Hold ...**

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Rehman S, Criner K.

“Tibial shaft fractures”.

**Saqib Rehman, MD,  
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Contemporary surgical approaches to the management of hip fractures have evolved over the years, resulting in improved outcomes and return of independence in the older adult. From the

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surgeon's perspective, there are variables, both pre op and post op, that can have either positive or negative consequences for this population.

## **Hip Fracture Part B: The Surgical Approach - MedBridge**

Understanding the principles of surgical management these cases and recognising when fixation or

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replacement is required is critical. The aim of this article is to present a contemporary evidence-based review of the surgical fixation options for management of periprosthetic fractures in the presence of well-fixed or loose components.

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