



Robert Murray

B. Sc (Hons) Biomed, DVM (Hons), MRCVS

Complex Small Animal Surgery
Orthopaedic and Soft Tissue

- Complex Surgery
- Cruciate Disease
- Patellar Luxation
- Fracture Repair
- BOAS / TECA-LBO

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External Skeletal Fixation (ESF) Discharge Sheet

Procedure Summary

Your pet has undergone fracture stabilisation using an external skeletal fixator. This technique involves placing pins through the bone above and below the fracture, which are connected externally by bars and clamps to create a rigid supporting frame.

This frame stabilises the fracture while allowing access to the limb for monitoring and care. Bone healing occurs over several weeks, during which time the fixator must remain stable and protected.

The fixator is usually removed once healing is confirmed on radiographs. Removal is typically performed under sedation or a short general anaesthetic and may occasionally be staged depending on healing progression.

Mild swelling, bruising, and discharge from the pin sites are expected in the early post-operative period.

Complications

Common and expected complications include mild swelling, bruising, and low-level discharge from the pin sites.

Occasional complications include pin tract irritation, superficial infection, or mild loosening of individual pins.

Less common complications include significant pin tract infection, frame instability, or delayed bone healing.

Rare but serious complications include frame failure, fracture displacement, deep infection, failure of the bone to heal, or the need for revision surgery.

The most common complication associated with external fixators is pin tract infection, which is usually manageable if identified early.



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Medications

Medication	How to Give	Duration	Purpose
NSAID	With food	As prescribed	Pain relief and anti-inflammatory
Antibiotic	As directed	As prescribed	Infection control (if indicated)
Additional analgesia	As directed	Short course	Post-operative comfort

All medications should be given exactly as prescribed. Anti-inflammatory medications should be given with food and may occasionally cause vomiting or diarrhoea. If this occurs, contact the practice for advice. Do not administer any human medications.

Frame and Pin Site Care

Daily care of the frame and pin sites is essential to ensure successful healing. Pin sites should be cleaned regularly using saline or clean warm water. Any discharge should be gently removed without scrubbing or causing trauma to the surrounding skin, and the area should be gently dried afterwards.

Small amounts of clear or slightly blood-tinged discharge and mild crusting are normal during the early healing period. Increasing redness, swelling, pain, thick discharge, or unpleasant odour are not normal and should be assessed promptly.

The external frame must not be adjusted or manipulated. Care should be taken to prevent it catching on furniture, bedding, fencing, or crate bars. An Elizabethan collar is often required to prevent licking or chewing of the pin sites.



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Activity and Environment

Strict control of activity is essential throughout the healing period. Exercise should be limited to short, controlled lead walks for toileting only. Running, jumping, climbing, and off-lead activity must be prevented.

When unsupervised, your pet should be confined to a safe, controlled area. Non-slip flooring is recommended, and care should be taken to avoid environments where the frame may catch or become entangled.

Failure to restrict activity can result in serious complications including frame failure or displacement of the fracture.

Rehabilitation and Recovery

Rehabilitation is important but must be carefully controlled and tailored to the stage of healing. Gentle weight-bearing is encouraged early, followed by gradual increases in controlled exercise as healing progresses.

Physiotherapy input is recommended to maintain joint mobility and muscle mass. Hydrotherapy may be introduced once the pin sites are stable and the risk of infection is low, and should only be performed under professional supervision.

Feeding and General Care

Maintaining an appropriate body weight is important to reduce stress on the healing limb. A controlled diet should be fed, and excessive treats should be avoided.

Fresh water should be available at all times, and your pet should be kept in a clean and calm environment during recovery.



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Monitoring at Home

Daily monitoring is essential. The pin sites, frame stability, limb use, and overall comfort should be assessed regularly.

Gradual improvement in weight-bearing is expected over time. Any sudden deterioration, increased discharge, or signs of discomfort should be taken seriously and assessed promptly.

When to Contact the Practice Immediately

Seek veterinary advice urgently if you notice sudden worsening lameness, non-weight-bearing, movement or loosening of the frame, significant swelling or discharge from pin sites, signs of pain or distress, or any part of the frame becoming bent or broken.

Follow-Up and Prognosis

A post-operative check is typically recommended within seven to fourteen days. Ongoing rechecks are required at regular intervals to monitor pin sites and frame stability.

Radiographs are usually performed between six and ten weeks to assess healing, although this can vary depending on the fracture. The frame is removed once healing is confirmed.

Prognosis is generally good with appropriate care. Outcome is highly dependent on careful pin site management, strict activity restriction, and early identification of complications.

Successful outcome depends on careful pin site care, protection of the external frame, strict activity restriction, and regular monitoring throughout the healing period.



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If you have any concerns at any stage, please contact your veterinary practice.

Kind regards

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