TECHNICAL TIPS

Positioning for elbow fixation in young children

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It is often difficult to gain access to achieve satisfactory intra-operative images during the fixation of young children's elbow fractures. We describe a theatre room set up that allows improved access to the limb while maintaining patient safety.

A regular arm board is used and the child is placed at 90° to normal position, allowing the mobile screen unit sufficient access. This theatre set up prevents the child from being positioned dangerously close to the theatre table edge while allowing the mobile screening unit sufficient access.

Figure 1 Diagram and photograph of theatre set-up

Simple technique for closure of skin lacerations under tension

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The closure of skin lacerations in patients with frail skin or surgical wounds under tension such as fasciotomies can present a difficult challenge. The use of sutures in a direct apposition repair of such lacerations can lead to cutting out due to skin fragility. We present a simple technique to prevent this. Adhesive strips are applied over the edges of the laceration (Fig 1). The wound edges are then opposed by sutures placed through the skin and overlying strips (Fig 2). The use of this technique increases the tensile strength of the laceration edges and decreases the risk of suture 'cut-out'.

Figure 1 Adhesive strips are applied over the edges of this pre-tibial laceration

Figure 2 Skin edges are opposed in this pre-tibial laceration by suturing through skin and adhesive strips