

# Nasal Trauma Advice Sheet

## **Fracture to nose:**

Following an injury to the nose, it is not routine to take an X-ray to check for a nasal fracture. This is due to the fact that the nasal bones do not show up well on X-rays. However X-rays may be required of other parts of the face, should fractures to your jaw or cheek bones be suspected.

Therefore as part of your assessment other signs of a broken nose will be looked for. This includes swelling, change to nasal shape and wobbling/clicking of the nose. If a fractured nose is suspected, a follow up appointment will be arranged with the Ear, nose and Throat (ENT) department. This usually takes place at around 7 – 10 days post injury when the swelling has reduced. At this point a decision will be made on if you require a small operation in order to reset your nose. If surgery is required, it's important that it takes place within 2-3 weeks of the injury. If surgery is delayed, it may not be possible to reset your nose under a short anaesthetic. Therefore a more major procedure such as a 'nose job' may be required.

If you do not require surgery, the nose will take 2 -3 weeks in which to heal.

## **Cuts/abrasions over nasal bridge:**

If you have sustained a cut over the bridge of your nose, it is important to keep the wound dry until it has fully healed up. Any stitches should be removed by your GP practice nurse at around 5 – 7 days post injury. You will need to book this appointment with your GP practice receptionist. If there is a deep cut over the bridge of your nose with a suspected underlying fracture, you may require a course of antibiotics.

You will have had an appointment with ENT in view of the broken nose. The stitches can be removed at your GP practise while you await the ENT clinic appointment for the broken nose.

### **Nose bleeds:**

Nose bleeds are common after a nasal injury. If bleeding occurs, you should lean forward and pinch high up on the soft part of your nose with your finger and thumb. You should do this without letting go for 20 minutes. If the bleeding fails to stop, you should return to A&E.

### **Rare complications of nasal trauma:**

- **CSF (cerebrospinal fluid) leak:**

Clear watery discharge from one nostril post injury can indicate a leak of fluid (CSF) from around the brain into the nose. This will put you at risk of meningitis. You should therefore return to A&E if you have this symptom.

- **Septal Haematoma (blood clot formation inside the nose):**

A septal haematoma may be present if you develop nasal blockage particularly at the entrance to either nostrils or a fever. You should return to A&E in order to have your nose re-assessed. If left untreated, a septal haematoma may destroy the nasal structure leaving permanent deformity.

### **Follow up:**

You will be advised if an ENT follow up appointment is required following your A&E consultation. If you are unable to attend your follow up appointment with ENT or feel that an appointment is no longer necessary, please contact the ENT department in order to rearrange/cancel.

If you have any concerns with regards to your head injury we will advise you to come back to the Accident and Emergency Department for further assessment.

## **Useful contact telephone numbers:**

ENT treatment room (Situated on D5W ward in the Royal Gwent Hospital): 01633 234018

ENT outpatients clinic (Main Outpatients Clinic in Nevill Hall Hospital): 01873 732799

**If you are at all concerned about your injury please contact the relevant Accident and Emergency Department or Minor Injury Unit (MIU):**

**Royal Gwent Hospital: 01633 234056**

**Nevill Hall Hospital: 01873 732073**

**Ysbyty Ystrad Fawr (YYF) MIU: 01443 802353 or 802349**

**Ysbyty Anuerin Bevan (YAB) MIU: 01495 363318**