In spite of advanced safety precautions, Facial Trauma continues to be a common occurrence.

Due to the visibility of this type of injury, it often results in emotional stress for the patient. Facial injuries may involve both soft tissues and the bony skeleton. In order to optimize both the emotional and physical outcome, it is necessary to evaluate and assess the depth and severity of the injury in order to promptly determine the appropriate treatment.

Lacerations should be treated as soon as possible. Ideally, a laceration should be treated within six to twelve hours following the injury. Delay can increase the risk of infection and may compromise healing.

If treatment is delayed due to a lack of immediate available transportation or other factors, the wounds should be covered with a moist dressing or antibiotic ointment (e.g. Bacitracin) to minimize drying of the injured and surrounding tissues.

The physical signs of facial fracture(s) include obvious deformity (asymmetry), crepitance, instability, and malocclusion. Treatment of skeletal trauma first requires an accurate diagnosis through radiographic imaging.

A CAT scan with coronal imaging, sagittal planes and 3D reconstructions provides the information needed to accurately identify the full extent of the injury. This information is extremely important for proper planning of a patient’s reconstructive operation.

Facial fractures are typically addressed after the majority of swelling has subsided. It is highly recommended to schedule reconstruction within seven to ten days following the injury. Beyond that, healing might be hindered by inaccurate reduction and malalignment of the facial fractures.

In cases where residual deformity is present following treatment or when immediate treatment is not performed, secondary reconstruction/revision can be done to reduce visual deformity. Secondary reconstruction of a soft tissue injury or scar revision is typically scheduled around twelve months post injury.
Alexis was sitting in the stands at a high school hockey game when she was hit directly in the left cheek by a hockey puck at high speed. She suffered displaced fractures of the nose, maxilla and orbit, resulting in dramatic deformity. In addition, she suffered a laceration of the lower eyelid.

Her care required open reduction and internal fixation of the fractures and repair of the laceration.

Alexis graduated on time with the rest of her class and started college the following September.

“The surgeons at NPS did an amazing job on the surgery. Everything’s healed up very nicely and I feel good. I still have a while for everything to be completely healed, but it’s coming along great and can only get better. I’m so thankful for everyone involved. The care given was extremely thorough and they made me feel very comfortable.” ~ Alexis