

Nail surgery pre-operative information

A full assessment will be carried out by your podiatrist prior to the procedure.

The procedure will not be done at the same time as the initial assessment, as by law, we must make sure you are given a minimum of 24 hours to decide if you feel this is the right treatment for you (except in emergency situations).

The Procedure

The proposed treatment is to remove part/all of your toenail(s) under local anaesthetic.

There will be 2 people present: the podiatrist doing the procedure and an assistant.

Your toe will be swabbed with an alcohol wipe to ensure your skin surface is clean.

You will then be lay back (unless you have any back issues/ don't want to be) and a local anaesthetic (scandonest 3% plain) will be injected in to your toe(s) in question.

Time will then be given for the anaesthetic to work and your toe will gradually become numb. This time varies from person to person.

Your toe will then be checked to ensure it is numb (using a sterile sharp/blunt tool).

We will then change our gloves and apron and replace them with ones from a sterile pack and commence the safe removal of your toenail/ part of your toenail.

Once your toe is numb, a rubber band called a tourniquet will be applied to your toe.

The procedure will then be carried out, using sterile tools

A chemical called phenol will be applied to the area of your nail bed (unless otherwise stated) for 3 minutes, where the nail has been removed to help prevent it re-growing.

The tourniquet will then be removed and sterile, padded dressing applied. This dressing is rather bulky so we recommend attending with either sandals or very deep toe-box trainers to accommodate this.

After a few minutes, we will ensure you are feeling well and then make another appointment for you within the next 7 days to have the dressings changed. It is important that you do not get the dressing we put on wet or remove it until you come to see us for your first redressing.

It is important you go home and rest following the procedure. Sometimes it can be a bit tender when the anaesthetic wares off after 2-3hrs. Do not take aspirin as it can promote excess bleeding. 1-2 Paracetamol (as per guidelines) is more than enough is required.

This procedure is intended to reduce the risk of infection spreading/ further infection occurring and to permanently remove the part of/ whole nail causing an issue.

RISKS and BENEFITS

- There is approximately 2-5% chance of nail regrowth. Small amounts of regrowth do not necessarily cause any issues or discomfort. However, there are a very small percentage that require the procedure to be repeated
- There is a risk of post-operative infection which may require antibiotics
- The wound can take on average between 4-8 weeks to heal. In certain circumstances this may take longer
- As part/all of your toenail has been removed there will be some post-operative bleeding. This should only be a small amount and may present as spot bleeding on your dressing.
- There is a small risk of permanent nerve damage when the anaesthetic is administered
- This procedure is not intended for cosmetic reasons. The aim of the procedure is to reduce pain/swelling/damaged nails that cause an issue on a daily basis
- Your nail will become narrower following a partial nail avulsion
- Permanent removal of symptomatic nail
- Pain relief caused by the nail
- Comfort wearing shoes

If you have any concerns or questions prior to the procedure, please do not hesitate to ask your podiatrist.

As we are using a local anaesthetic in your toe(s), you will not be able to drive until the anaesthetic has fully worn off as it can invalidate your insurance and you may not be able to feel the pedals sufficiently to drive safely. Please ensure you have someone to pick you up from clinic to take you home following the procedure.

Any children requiring nail surgery MUST BE accompanied by their parent or legal guardian. As it is a surgical procedure we are unable to proceed with the surgery if any other adult is present.