

## Patient Name

Nail surgery procedure

<b>Date of birth</b>	<b>DATE OF BIRTH</b>	<b>Practitioner</b>	<b>Practitioner Name</b>
<b>Address</b>	<b>Address 1 Address 2 Address 3</b>	<b>Appointment</b>	18 Jun 2025, 3:00PM
		<b>Created</b>	18 Jun 2025, 1:25PM
		<b>Last updated</b>	18 Jun 2025, 5:58PM

## Procedure

**Site** / Both  
1 toe  
Total Nail Avulsion

**Presenting toe problem** Other nail dystrophy - long term o/m

**Consent signed**  Yes  
 No

**Consent Confirmed**  Yes  
 No

**LA technique** Total ring block to both 1 toes

**Named LA drug** 3% Mepivacaine plain.  
MSD: 10.26.....ml, ...308.....mg  
LA use by date and batch number number B33669AA 2027 10  
Total volume administered 4.4ml

**Procedure (delete as necessary)** Pre-operative skin preparation using 10% povidone iodine  
Application of tourniquet to  
Right 1 toe for 5 mins,  
Left 1 toe for 5 mins  
Total avulsion of both 1 nail plate  
**No phenol applied following discussion with pt. Nail bed cleared and nail removed to allow treatment with terbinafine 1% spray during regrowth**  
Revascularisation after removal of tourniquet: Sluggish ( 2 secs both feet)  
Post-Operative Haemorrhage: mild

**Dressing** Bactigras, Kaltostat, Melolin, Sterile Gauze, Tubegauze, Mefix tape

**Dressings pack issued**

Yes

No

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**Written post-operative advice sheet and  
follow-up appointment**

Yes

No

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**Letter to GP**

Yes

No