**1. What was the reason for the implant removal?**

(Multiple selections are possible)

* pain
* impairment of function
* foreign body sensation
* allergy
* fear of cancer
* problems with metal detectors
* refracture
* malposition of the metal
* nonunion of the fracture (pseudarthrosis), insufficient stabilization of the fracture (failure of osteosynthesis)
* professional recommendation
* personal preference

**2. Did complications occur after the surgery?**

○ No ○ Yes ○ not applicable

 If yes, what was the complication?

(Multiple selections are possible)

* Re-fracture
* Nerve damage
* Infection
* Impaired wound healing
* Too much scare tissue (keloid development)
* bleeding
* thrombosis
* incomplete removal
* other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**3. What time after the fracture the metal was removed?**

○ up to 6 months ○ 7-12 months ○ 13-18 months ○ 19-24 months ○ over 24 months

**4. How long lasted the absence from work after the operation:**  \_\_\_\_ days

**5. Did you suffer from pain before the metal removal?**

○ no pain ○ little pain ○ moderate pain ○ severe pain

**6. Did you suffer from pain after the metal removal?**

 ○ no pain ○ little pain ○ moderate pain ○ severe pain

**7. Was the function impaired before the metal removal?**

* No impairment ○ little impairment
* Moderate impairment ○ severe impairment

**8. Was the function impaired after the metal removal?**

* No impairment ○ little impairment
* Moderate impairment ○ severe impairment

**9. Today, would you decide again for an operation to remove the metal?**

○ No ○ Yes