

Useful contact numbers

King's Mill Hospital: 01623 622515

Newark Hospital: 01636 681681

Further sources of information

NHS Choices: www.nhs.uk/conditions

Our website: www.sfh-tr.nhs.uk

Reference: Fractures (non-complex): assessment and management: Management of torus fractures, NICE guideline [NG38] Published date: February 2016

Patient Experience Team (PET)

PET is available to help with any of your compliments, concerns or complaints, and will ensure a prompt and efficient service.

King's Mill Hospital: 01623 672222

Newark Hospital: 01636 685692

Email: sfh-tr.PET@nhs.net

If you need this information in a different language or format, please contact the PET (as above).

This document is intended for information purposes only and should not replace advice that your relevant health professional would give you. External websites may be referred to in specific cases. Any external websites are provided for your information and convenience. We cannot accept responsibility for the information found on them. If you require a full list of references for this leaflet, please email sfh-tr.patientinformation@nhs.net or telephone 01623 622515, extension 6927.

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INFORMATION FOR PATIENTS, PARENTS, GUARDIANS AND CARERS

Buckle fracture of wrist

Your child has sustained a buckle fracture of their radius (forearm) bone. The aim of this leaflet is to answer some of the questions you may have about buckle fractures, including using the splint at home.



What is a buckle fracture?

A buckle fracture is common injury in children where the bone has not completely broken but has slightly cracked or kinked on one side only. The injury is commonly caused by falling onto the arm.

What is the treatment?

Buckle fractures heal quickly with a splint. The splint protects the bone and allows it to heal. These fractures usually do not need plaster as they are not completely broken or displaced.

It is important to give your child appropriate doses of paracetamol or ibuprofen to help with the pain as it will still be sore for a short period of time even after applying the splint

How long will the splint be needed?

The splint should be worn day and night for 3 weeks from when you have been given it.

How should I remove the splint?

Make sure that your child is calm and that you are not rushed or distracted. Remove the straps and gently remove the splint.



Allow your child to gently and slowly move the wrist. There is no restriction in moving the elbow or shoulder after the injury. Once the splint finally comes off at the end of 3 weeks the arm should be pain-free, although it may be slightly stiff from being in a splint and your child may be a little unsure to start with.

Can the splint be removed during washing/ showering?

It is advisable not to remove the splint for the first 3 days unless you have a concern.

After this period the splint can be removed for washing and bath times as long as no direct pressure is placed through the forearm. It can also be covered during the washing/ showering.

Can my child do normal activities with the splint on?

Children can do normal activities such as eating, drinking, writing and getting dressed with the splint on.

Can my child go back to school / playgroup with the splint on?

Yes, your child can go to school and do normal school work., but please make sure that the school or playgroup are aware that the arm is injured so they take appropriate care. Direct pressure should not be placed through the arm.

Does my child need any further precaution?

Sporting activities, physical education and rough play should be avoided for 6 weeks from injury.

What should we do with the splint once it has been removed?

It is best to keep the splint safe for a few days to make sure there is no further need for it. After this, the splint can be discarded. Ideally, children do not need any further follow-up, x-rays or physiotherapy after 3 weeks time.

When does my child need a follow-up?

If the pain does not settle after a week of removing the splint or if the child has injured the wrist again in the 3 weeks time in splint.

What should I do if my child keeps removing the splint?

In the first 2 weeks we advise that the splint should be kept on most of the time.

Try securing the straps with adhesive tape. If your child keeps removing the splint after the second week, appears to be comfortable and uses the arm freely, it is more than likely that the buckle fracture has healed sufficiently by now. You can leave the splint off .

What should we do if the wrist is still painful or we have any worries or concerns?

If the wrist is still painful after 4 weeks, or if you have any worries or concerns, please contact the Orthopaedic Fracture Clinic between 8am until 5pm, Monday to Friday on 01623 622515.

If you feel more urgent attention is needed, then please contact your GP or take your child to your local Emergency Department.