compassionate care

Virtual Fracture CLINIC PROTOCOLS

NHS Calderdale and Huddersfield NHS Foundation Trust

## Shoulder

| Injury | ED Treatment | Pathway |
|---|---|---|
| **Clavicle**<br>Adult Undisplaced<br>Displaced<br>Paediatric Undisplaced<br>Displaced<br>Open #/threatened skin/Floating shoulder | Polysling/BAS | VFC<br>VFC<br>Discharge sling for 2 weeks then Mobilise as pain allows<br>Discharge<br>Ortho On Call |
| **Proximal Humerus #**<br>Paediatric Undisplaced/minimal displacement/angulation<br>Significant Displacement /angulation | Collar & Cuff | Discharge C&C for 2 weeks, mobilise as pain allows<br>VFC |
| **Proximal Humerus #**<br>Adult | Collar & Cuff | VFC |
| **Shoulder Dislocation (no #)**<br>First time & Recurrent<br>Unreducible | Reduce ED<br>Polysling 2/52 | MSK shoulder Physio Clinic<br>Ortho on call |
| **Fracture Dislocation**<br>Gt Tuberosity #<br>Unreducible /Multi-fragmentary | ED Reduction- Polysling<br>Polysling for comfort | VFC as per # pathway<br>Ortho on call |
| **ACJ Dislocation**<br>Grade All Grades<br>Open Injury / Threatened skin | Polysling / BAS<br>Pol | MSK shoulder Physio Clinic<br>Ortho on call |
| **SCJ Injury** | | MSK shoulder Physio Clinic |
| **? Rotator Cuff Injury** | Polysling / BAS | MSK shoulder Physio Clinic |
| **Significant muscle injury / rupture e.g. pec rupture** | | MSK shoulder Physio Clinic |
| **Humeral Shaft** Documentation of Radial Nerve function pre/post application of brace | Humeral Brace with Check XR | VFC |
| **Radial nerve injury?** | | Ortho on call |

## Elbow

| Injury | ED Treatment | Pathway |
|---|---|---|
| **Elbow dislocation** | Reduce ED,<br>AE Backslab | VFC |
| **Supracondylar # Distal Humerus (Paediatric)**<br>Undisplaced<br>Displaced | AE Backslab (>90 Degrees Flexion) Check XR in cast<br>AE Backslab (position of comfort) | VFC<br>Ortho on call |
| **Paediatric Epi/condylar #**<br>Undisplaced<br>Displaced | AE Backslab | VFC<br>Ortho on call |
| **Radial Head/Neck**<br>Undiplaced /Minimally displaced<br>Comminuted/significantly displaced | Collar & Cuff<br>Collar & Cuff<br>(AE backslab if pain ++) | Discharge<br>VFC |
| **Paediatric Radial Head Subluxation**<br>(with Ulna Plastic deformation) | AE Backslab | VFC |
| **Olecranon**<br>Undisplaced<br>Displaced | AE Backslab | VFC<br>Ortho on call |
| **Fat Pad +ve Elbow** | Collar & Cuff | Discharge – Encourage ROM, discard C&C as comfort allows |
| **Significant muscle injury / rupture e.g. distal biceps rupture, triceps rupture** | | MSK shoulder Physio Clinic |

## Hand & Wrist

| Injury | ED Treatment | Pathway |
|---|---|---|
| **Fingertip**<br>Crush # Terminal Phalanx<br>Nailbed<br>Significant Soft Tissue Injury/? terminalisation | ? Mallet splint to protect<br>Wound Management | Discharge<br>GP Practice Nurse Wound review<br>Plastics |
| **Mallet Finger**<br>Ext Tendon (No Bony Injury)<br>Avulsion # <50% Joint Surface<br>>50 % Joint Surface | Well-fitting Mallet splint (Ensure allows PIPJ Flexion)<br>8/52 then 4/52 at night<br>6/52 then 4-6/52 night<br>(XR in splint to ensure joint congruence) | Discharge<br>Discharge<br>VFC |
| **Undisplaced**<br>Stable Phalangeal # / Metacarpal #<br>Concern over stability | Neighbour strapping 2/52<br>+/- Splint | Discharge<br>VFC |
| **Displaced phalangeal #** | ED Reduction<br>N/S +/- Volar Slab<br>(? Rotation) | VFC |
| **IP Dislocation** | ED Reduction, NS<br>(check Extensor Mechanism post reduction) | Discharge if intact<br>Disrupted – Capner Splint – VFC |
| **Metacarpal Neck #** | Neighbour strap | Discharge |
| **Bennett's/ 1st MC Basal #** | Bennett's Slab (Ensure IPJ Mobile) | VFC |
| **CMC #/dislocation**<br>Undisplaced<br>Displaced | BE Slab | VFC<br>Ortho On Call |
| **Scaphoid#** | Scaphoid Slab | VFC |
| **? Scaphoid** | Scaphoid Slab/Splint | F2F # Clinic 2/52 post injury |
| **Thumb MCPJ Injury**<br>Stable<br>? Unstable | Stability assessment<br>Stable – Splint | VFC<br>F2F # Clinic |
| **Volar Plate Injury (+/- Avulsion #)** | Neighbour Strap 2/52 | Discharge |
| **Minor Trauma Evidence of OA No #** | Symptomatic Treatment ? Splint 2/52 | Discharge |
| **Paediatric Torus # Distal Radius** | Futura splint 3-4/52 | Discharge |
| **Paediatric Radius /Ulna** | Undisplaced – AE backslab<br>Displaced/Angulated – AE Slab | VFC<br>Ortho on call |
| **Adult Wrist** | Triquetral Avulsion # - Futura splint 4 wks | Discharge |
| **Adult Distal Radial #** | Undisplaced – BE Backslab<br>Displaced – ED Reduction with check XR in Backslab<br>Acceptable Position<br>Unacceptable position<br>? Needing Surgery | VFC<br>VFC<br>Ortho on call |
| **Adult Radial /Ulna shaft**<br>**(XR must include prox & distal Radio/ulnar joints)**<br>**Isolated Radial / Ulna Shaft**<br>**(XR must include prox & distal Radio/ulnar joints)** | Undisplaced<br>Displaced<br>Undisplaced<br>Displaced | VFC<br>Ortho on call<br>VFC<br>Ortho on call |