

Paediatric Forearm and Wrist Fracture Manipulation

Following examination and x-rays it has been found that your child has a fracture of one or both bones in the forearm or wrist area. This is a common injury in children. The fracture sustained by your child had caused a deformity to the bones in the forearm and wrist.

Treatment

Your child should have received pain medication either at triage or soon after, usually a strong painkiller which is sniffed up the nose (IN diamorphine or fentanyl)

The treatment of choice for the majority of these deformed forearm and wrist fractures is early manipulation and plaster application to straighten the bones which will allow healing over the next 6 weeks.

If it is decided that your child and the injury is suitable for this management the doctor will explain the procedure to you and your child to ensure you are happy to proceed. A nurse will attend to provide more pain medication if needed and will show your child how to use Entonox ("gas and air").

Once the procedure has been completed and the plaster is in place, a repeat x-ray will be done to ensure adequate positioning of the bones, and the doctor will re-examine the finger movements and to ensure the nerve and blood supply has not been damaged.

What are the risks?

In most cases the procedure is straightforward and tolerated well by children.

The pain relief administered can occasionally cause nausea and vomiting, light-headedness and drowsiness.

If the procedure is too painful and your child becomes unacceptably distressed or you are not happy to continue the procedure it will be stopped, if this is the case your child is likely to need to be admitted and undergo a general anaesthesia to carry out the manipulation, the doctor will tell you if this is the case.

If following the manipulation and plaster application the positioning of the bones is not acceptable on the repeat x-ray, again it is likely that your child will need to be admitted to repeat the procedure under a general anaesthetic, the doctor will tell you if this is the case.

What happens afterwards?

If the repeat x-ray shows acceptable positioning of the bones, then your child will be discharged 1 to 2 hours after the procedure. You will be provided with a fracture clinic appointment for review of the injury and healing by the trauma & orthopaedic (T&O) team. You will be advised of what pain medication to administer, regular paracetamol and ibuprofen at the correct dose for the age of your child is usually adequate.

If the pain worsens and is severe and is not controlled by the pain medication, or your child develops pins and needles or numbness or you have any other concerns, please contact the T&O registrar through switchboard on 01905 763333 and ask for bleep 420 and they will advise you of what to do.

If you are asked to return or you decide to return to the ED due to a concern relating to the injury, you will be seen by the T&O doctor either in their clinic or in the ED.

Patient Experience

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

Feedback

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

Patient Advice and Liaison Service (PALS)

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

How to contact PALS:

Telephone Patient Services: 0300 123 1732 or via email at: wah-tr.PALS@nhs.net

Opening times:

The PALS telephone lines are open Monday to Friday from 8.30am to 4.00pm. Please be aware that you may need to leave a voicemail message, but we aim to return your call within one working day. If you are unable to understand this leaflet, please communicate with a member of staff.

For additional medical advice, if your symptoms or condition worsens:

Contact your GP

NHS 111:

Get help with your symptoms, NHS111:
Information to help you manage your health:

Telephone 111

<https://111.nhs.uk/>
www.nhs.uk

In an emergency telephone 999

Emergency Department (A&E)
Alexandra Hospital
Woodrow Drive
Redditch B98 7UB

Tel: 01527 512030

Minor Injury Unit
Kidderminster Hospital
Bewdley Road
Kidderminster DY11 6RJ

Tel: 01562 513039

Emergency Department (A&E)
Worcestershire Royal Hospital
Charles Hastings Way
Worcester WR5 1DD

Tel: 01905 760743