

Occult Proximal Radius Fracture

Elbow 2

Fracture Care Team: Shared Care Plan

Trust Switchboard for both sites: 0300 131 4500
 Fracture clinic and orthopaedic outpatient appointments:
 Eastbourne 0300 131 4788
 Conquest 0300 131 4861
 Casting Department: Eastbourne 0300 131 5564
 Casting Department: Conquest 0300 131 4860

This information leaflet explains the ongoing management of your injury.

You have sustained an occult fracture to one of the bones in your elbow (Proximal radius). An occult fracture is a fracture that does not appear in x-rays but there are signs to indicate one. Please see the picture below to understand where this injury is. This normally takes approximately 6 weeks to unite (heal). You may use the arm in the meantime and indeed it is important to keep the elbow moving to prevent stiffness. You should, however, avoid any heavy lifting for the full 6 weeks. Take pain killers as prescribed. If you are worried that you are unable to follow this rehabilitation plan, or have any questions, then please phone the Fracture Care Team for advice.

Picture of injury



We do not routinely follow up patients with this type of injury. **If after three weeks** you are not close to achieving full movement in your elbow please contact us using the details listed above. We may arrange some physiotherapy to help you with your exercises.

Or if you are experiencing pain and symptoms anywhere else, other than at the site of the original injury or surrounding area, please also get in touch using the telephone numbers at the top of this letter.

Please follow the Management / Rehabilitation plan shown below

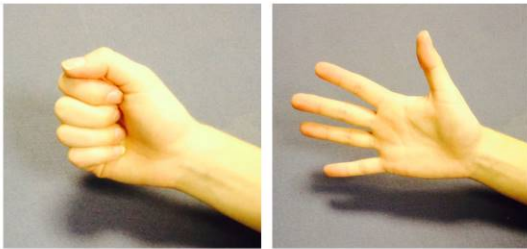
Weeks since injury	Rehabilitation plan
0-2	Wear sling for comfort only. Take your arm out of the sling and practise gently moving the elbow (see below). Do the exercise below every hour in the daytime but do not force the movement.
2-6	Try not to use the sling and do normal light activities with the arm. Avoid lifting more than the weight of a cup of tea for six weeks. Continue with the exercises.
6 -12	The fracture should be united (healed) and you can do normal activity but be guided by any pain you get. You should be able to carry out day to day activities although arduous tasks may cause discomfort.

Smoking cessation

Medical evidence suggests that smoking prolongs fracture healing time. In extreme cases it can stop healing altogether. It is important that you consider this information with relation to your recent injury. Stopping smoking during the healing phase of your fracture will help ensure optimal recovery from this injury.

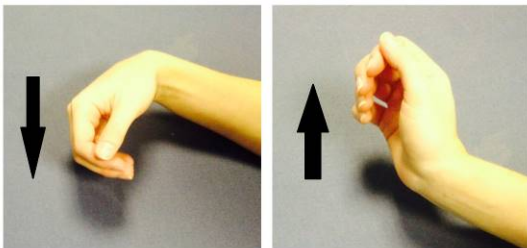
For advice on smoking cessation and local support available, please refer to the following website: <http://smokefree.nhs.uk> or discuss this with your GP.

Initial Exercises to be done 5 - 6 times a day



Finger and wrist flexion and extension

Open and close your hand as shown 10-15 times. Then move your wrist up and down 10-15 times.



After a few days, hold a soft ball / ball of socks. Squeeze the ball as hard as possible without pain. Hold for 5 seconds and repeat 10 times.



Elbow Bend to Straighten

Gently bend and straighten your elbow as far as you can without pain. You should not feel more than a mild to moderate stretch. You can use your other arm to assist if necessary.

Repeat 10 - 15 times if there is no increase in pain.



Forearm Rotations

Begin this exercise with your elbow at your side and bent. Slowly turn your palm up and down as far as you can go without pain. You should not feel more than a mild to moderate stretch. You can use your other arm to assist if necessary. Repeat 10 - 15 times if there is no increase in pain.

Sources of information

This information leaflet has been developed by the Fracture Care Team at Brighton and Sussex University Hospitals Fracture Care Team and adapted for use at East Sussex Healthcare NHS Trust. Information been updated during the COVID-19 pandemic to ensure that patients with injuries have information, support and care despite social distancing.

Important information

This patient information is for guidance purposes only and is not provided to replace professional clinical advice from a qualified practitioner.

Your comments

We are always interested to hear your views about our leaflets. If you have any comments, please contact the Patient Experience Team – Tel: 0300 131 4731 or by email at: esh-tr.patientexperience@nhs.net

Hand hygiene

The trust is committed to maintaining a clean, safe environment. Hand hygiene is very important in controlling infection. Alcohol gel is widely available at the patient bedside for staff use and at the entrance of each clinical area for visitors to clean their hands before and after entering.

Other formats

If you require any of the Trust leaflets in alternative formats, such as large print or alternative languages, please contact the Equality and Human Rights Department.

Tel: 0300 131 4434 Email: esh-tr.AccessibleInformation@nhs.net

After reading this information are there any questions you would like to ask? Please list below and ask your nurse, practitioner or doctor.

Reference

Thank you to the Brighton and Sussex University Hospitals NHS Trust and to Kate Weatherly, Specialist Orthopaedic Practitioner for the first version.

This leaflet can be found at: www.esht.nhs.uk/leaflet/occult-proximal-radius-fracture/

The following clinicians have been consulted and agreed this patient information:

Mr Guy Selmon – Consultant Orthopaedic Surgeon
Mr Andrew Skyrme – Consultant Orthopaedic Surgeon
Helen Harper-Smith – Professional Lead Physiotherapist
Hilary Kircher – Clinical / Operational Lead Outpatient Physiotherapist
Mrs Scarlett McNally - Consultant Orthopaedic Surgeon
Miss Miranda Champion - Consultant Orthopaedic Surgeon

The Clinical Specialty/Unit that have agreed this patient information leaflet:
Department of Trauma and Orthopaedics

Next review date: April 2023
Responsible clinician/author: Helen Harper-Smith Professional Lead Physiotherapist

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