# Patient information



# **Distal Radius Fracture (for review)**

Wrist 3

Fracture Care Team: Shared Care Plan

Eastbourne - 01323 414928 Conquest - 01424 757576 Email - esht.vfc@nhs.net

This information leaflet follows up your recent telephone conversation with the Fracture Care Team explaining the ongoing management of your injury. Your case has been reviewed by an Orthopaedic Consultant (Bone Specialist) and Fracture Care Specialist.

You have sustained a distal radius fracture (the bone on the thumb side of the wrist)

**Healing:** This normally takes approximately 6-8 weeks to heal. It is normal for

it to continue to ache a bit for 3-6 months after the injury.

Pain and swelling: Take pain killers as prescribed. The plaster backslab helps healing

by keeping the bones in a good position. Elevate the arm to reduce

swelling for the first few days

**Using your arm:** It is important to keep the fingers and thumb moving to prevent

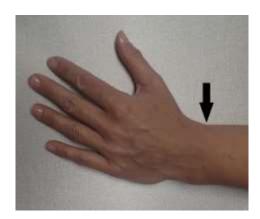
stiffness.

**Follow up:** There is a small chance that this fracture can displace (move).

Therefore we routinely recommend a repeat x ray at 1 week after the

injury and a new plaster cast.

#### **Area of injury**



If you are worried that you are unable to follow this rehabilitation plan,

**Or** if you are experiencing pain or symptoms, other than at the site of the original injury or surrounding area,

**Or** have any questions then please phone the Fracture Care Team for advice.

# Please follow the plan

| Weeks<br>since<br>injury | Plan  |
|--------------------------|---|
| 0-1                      | ✓ You will be in a backslab.  |
|                          | ✓ Use the sling for the first few days if the arm is painful.   |
|                          | ✓ Move your fingers and elbow often (do the stage 1 exercises)  |
| 1-6                      | ✓ You will be seen in fracture clinic   |
|                          | You will be put in a full plaster (this will be removed in the clinic at 5-6 weeks) Continue to move the fingers often. |
|                          | ✓ You can use the arm for simple tasks as pain permits.   |
| 6 -12                    | ✓ You will, be seen in fracture clinic for removal of plaster   |
|                          | ✓ The fracture should be united (healed). This will be confirmed in clinic.   |
|                          | You can begin to resume normal activity but be guided by any pain you are experiencing.                                 |
|                          | ✓ You can start the stage 2 exercises below if the wrist feels stiff.   |
|                          | ✓ Carry out day to day activities.  |
|                          | Heavy tasks, heavy lifting or sport may cause some initial discomfort.  |
| 12                       | If you are still experiencing significant pain and swelling then please contact the Fracture Care Team for advice.      |

# Advice for a new injury

#### **Rest and Elevation:**

Try to rest the arm for the first 24-72 hours to allow the early stage of healing to begin. Raise your wrist above the level of your heart with a sling if it is throbbing.

#### Movement and exercise:

It is important to keep your fingers and thumb moving while you are in the plaster. After the plaster is removed your wrist will be stiff, please follow the exercises below to get the movement back.

# **Smoking cessation**

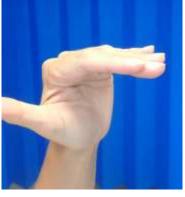
Medical evidence suggests that smoking prolongs fracture healing time. In extreme cases it can stop healing altogether. It is important that you consider this information with relation to your recent injury. Stopping smoking during the healing phase of your fracture will help ensure optimal recovery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

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

#### **Exercises**

### Stage 1 exercises - From Day 1





## Finger exercises:

Keep your fingers moving whilst you are in the plaster



en elbow as far as you can without

than a mild to moderate stretch. m to assist if necessary. ere is no increase in pain.

pur elbow at your side and bent to

90 degrees.

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.

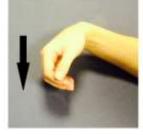


## Stage 2 exercises - if advised to follow at 6 week clinic:











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.

### 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.

# **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: (01323) 417400 Ext: 5860 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: (01424) 755255 Ext: 2620

After reading this information are there any questions you would like to ask?

| and ask your nurse or doctor. |  |  |  |
|-------------------------------|--|--|--|
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#### Reference

Thank you to the Brighton and Sussex University Hospitals NHS Trust

The following clinicians have been consulted and agreed this patient information: Mr Guy Selmon – Consultant Orthopaedic Surgeon Mr Andrew Skyrme – Consultant Orthopaedic Surgeon

Mrs Scarlett McNally - Consultant Orthopaedic Surgeon Mrs Miranda Champion - Consultant Orthopaedic Surgeon Helen Harper-Smith – Professional Lead Physiotherapist Hilary Kircher – Clinical / Operational Lead Outpatient Physiotherapist

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

Next review date: April 2020

Responsible clinician/author: Helen Harper-Smith / Kate Weatherly – Specialist Orthopaedic

Physiotherapist

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