

# Torus / 'Buckle' Fracture (Children)

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Na żądanie ta ulotka może zostać udostępniona  
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## Information for Patients & Parents / Guardians

This is a follow-up leaflet to your child's recent telephone consultation with the fracture care team explaining the ongoing management of your child's injury. Their case has been reviewed by an Orthopaedic Consultant (Bone Specialist) and a Physiotherapist.

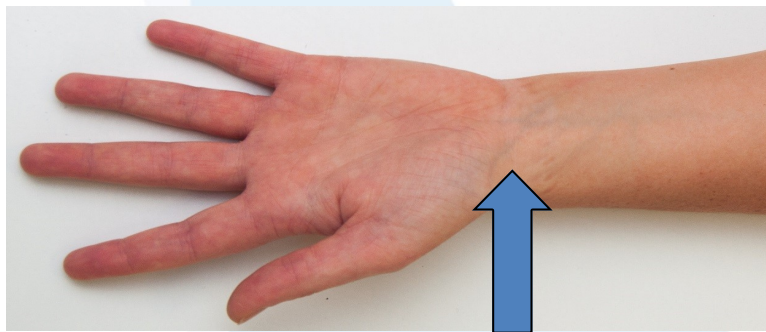
### Your child has sustained a Torus or 'Buckle' Fracture.

This is a common injury in children and normally heals very well in approximately three weeks with the use of a splint with no need for a larger plaster. Children's bone is softer and more flexible than adult bone. For this reason, instead of breaking all the way through, the bone has a small crack or kinks on one side only. Most of these injuries heal perfectly well provided that the rehabilitation plan on the following page is followed.

Following the rehabilitation plan will help to prevent further injury and help to improve your child's function and use of their hand and arm. Completing the exercises is important to prevent their elbow and forearm from becoming stiff. During this time you can give your child appropriate pain relief as the area will be sore even after the splint is applied.

If you are worried that your child is unable to follow the rehabilitation plan, they are experiencing pain or symptoms other than at the site of the original injury or surrounding area, their wrist still seems very painful or swollen after three weeks, they are not willing to use it after three weeks or if you have any questions, then please contact us for advice using the contact details on the back of this booklet.

Please see the picture below to understand where this injury is.



## Management / Rehabilitation Plan

Weeks since Injury	Rehabilitation Plan
0-3	<ul style="list-style-type: none"><li>• Wear the splint provided at all times, including in bed at night, apart from when completing exercises or for washing.</li><li>• Start Stage 1 Exercises.</li><li>• Avoid sports / rough play.</li></ul>
3+	<ul style="list-style-type: none"><li>• Gradually discontinue using the splint. If the wrist is a little painful after being used then the splint can be re-applied for comfort. This should only be done for short periods.</li><li>• Gradually increase normal use of hand and arm.</li><li>• Avoid sports and rough play for a further two weeks after removing the splint.</li><li>• If your child is still experiencing significant pain and / or stiffness or is not willing to use their hand or arm then please contact us for further advice / management .</li></ul>

## Exercises

### Exercises (3-4 times a day)

#### Finger and wrist flexion and extension

Open and close the hand of the injured arm as shown 10 times.

Then move the wrist up and down 10 times.



#### Elbow bend & straighten

Bend and straighten the elbow (of their injured hand) so that they feel a mild to moderate stretch.

They can use their other arm to assist if necessary, but do not push if it causes pain.



#### Forearm rotations

Rest the elbow of the injured arm by their side. Bend it to 90 degrees. Your child should slowly rotate their palm up and down until they feel a mild to moderate stretch. They can use their other arm to assist if necessary. Do not push if it causes pain.

Repeat 10 times.



### Contact Information

Should you have any worries or concerns following discharge from hospital, please contact either:

Fracture Clinic: 0151 430 4905  
(9 am-5pm Monday to Friday)

Emergency Department: 0151 430 2399

Whiston Hospital  
Warrington Road,  
Prescot, Merseyside, L35 5DR  
Telephone: 0151 426 1600

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