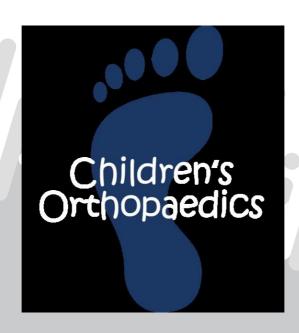


Information about

Displaced Supracondylar Humeral (Elbow) Fracture



Royal Hospital for Children Trauma and Orthopaedic Department 1345 Govan Road Glasgow G51 4TF

What is a supracondylar fracture?

This is a fracture of the upper arm bone (humerus) just above the elbow joint.

It is a very common fracture in children.

Sometimes the fracture is described as displaced (when the bone has moved) and then it needs to be put in a better position.

How do you treat it?

At first we will place your child's arm in a cast called a backslab. This is half plaster cast and half soft bandage, and supports the fracture while allowing for any further swelling. The cast will be applied from their knuckles to the very top of their arm. This keeps the fracture stable and your child comfortable until your child has surgery. The surgery involves putting some K wires into the bone to keep it in a good position while it heals.

The orthopaedic team will arrange for your child to be admitted to the hospital for their surgery. Your child will have an anesthetic which means they will be asleep during the surgery.

We will give you a separate information leaflet about K wires.

During the surgery your child will receive antibiotics to reduce the risk of infection. They will also receive pain killers to help with the pain after their surgery. Ward staff will provide pain relief during their stay to keep your child as comfortable as possible.



Care at home

Fractures are painful, but having a cast on will support the fracture and should help with any pain.

In the first few days after the fracture, simple pain killers like Paracetamol (Calpol) and Ibuprofen (Nurofen), can help relieve any discomfort. Always check the packaging and doses before giving any medication.

We will give you a plaster care advice leaflet that tells you everything you need to know about caring for your child's cast and the contact number for the Royal Hospital for Children plaster team.

Follow-up

If K-wires have been used to fix your child's fracture, we will remove these in a Pin clinic approximately 3 weeks after surgery.

Your child will receive a pin clinic	appointment on
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After we remove the cast and wires you child will not need another cast. It is important to encourage your child to start moving their elbow to prevent long term stiffness, but they should avoid falls for a few weeks to prevent further injury.

Your child will be reviewed in the fracture clinic by a member of the orthopaedic team who will decide if they need further follow up.

These clinics can be very busy as many children have X-rays taken, casts changed and are reviewed by Orthopaedic staff over the course of a morning, so we ask for your patience.

Concerns or queries

If you have any concerns about your child's condition please contact

Acute orthopaedic trauma liaison team:

2 0141 451 8497 or 0141 451 5644

⊠ ggc.rhcorthotrauma@ggc.scot.nhs.uk

Or for plaster issues contact plaster room directly on

T 0141 452 4129



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