**DISTAL TORSUS FRACTURE IN FOREARM**

**Inclusion**
- Patient any age with distal forearm injury and/or suspicion for forearm fracture

**Exclusion**
- All other fractures

**Indication for X-ray**
- Hx mechanism that could cause distal radius fracture (e.g. fall from object)
- Pain in forearm with a clinical suspicion for fracture

**Patient evaluated for distal forearm injury**

- Provide pain control as needed
- Complete neurovascular assessment
- Ice pack & elevation

- **Manage off pathway**

- **Is x-ray needed (see indication)**

- **YES**
  - Provider places order for 2 view x-ray
  - Place child in Velcro removable splint if x-ray not readily available at facility
  - Complete neurovascular assessment after splinting

  - Remove splint (if present) and complete imaging

  - **YES**
    - If image results are not readily available (e.g. holiday), continue to splint arm until presence of fracture is determined and continue pathway

  - **UNKNOW**
    - **Manage off pathway**
    - **Is fracture present?**

  - **NO**
    - **Consult Ortho and manage off pathway**

  - **YES**
    - **Does the fracture meet Inclusion criteria? See Appendix A**

- **Radiologist enters dot phrase. Fractaccept and calls report to Provider. See Appendix B for After Hours workflow**

**Discharge Criteria**
- Pain tolerated well in splint
- Splint fitting appropriately
- Appropriate neurovascular assessment

**Discharge Plan**
- Maintain splint
- Recommend Vitamin D and Calcium if not already part of daily regimen
- Start Pain Mgmt Therapy (Acetaminophen/Ibuprofen)
- Provide Home Care instructions (Splint, Vitamin D & calcium, Pain control)
- Follow up in 4 weeks with PCP (need for splint, pain control, x-ray, activity)

**Disclaimer:** Pathways and/or protocols are intended as a guide for practitioners and do not indicate an exclusive course of treatment nor serve as a standard of medical care. These pathways and/or protocols should be adapted by medical providers, when indicated, based on their professional judgment and taking into account individual patient and family circumstances. Updated 07/2020

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APPENDIX A – RADIAL DISTAL BUCKLE FRACTURE X-RAY

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APPENDIX B - RADIOLOGY AFTER HOURS WORKFLOW

Pathway
Order placed for x-ray at Children’s and patient arrives after hours (Regular hours M-F until 1900)

Perform Image

Ordering provider will read and interpret images*

Fracture meets Distal Torus Fracture criteria
Provider follows the Distal Torus Fracture algorithm

Fracture does not meet Distal Torus Fracture criteria
Provider maintains splint, consults Ortho and does not follow Distal Torus Fracture algorithm

*If image results are not readily available, and provider unsure if fracture is present continue to splint arm until presence of fracture is determined and continue pathway

Pedi Ortho (402) 955-6543
Pedi Ortho pager (402) 955-6300
Children’s Radiology (402) 955-8039

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