Discharge Information: Elbow fractures

This information sheet aims to answer any questions you may have about your care after discharge.

You or your family member has been diagnosed with a fracture of one of the bones of the elbow.

The bones which make up the elbow include the upper arm bone (Humerus) and the two bones of the forearm (Radius and Ulna).

Uncomplicated fractures are usually treated with immobilisation in a sling; however more complicated fractures may require a plaster splint and correction under anesthetic.

Initial Treatment

Initial management is usually by immobilisation in a simple arm sling or plaster half cast or "backslab."

Once supported with a sling simple pain killers such as Paracetamol or Ibuprofen often provide adequate pain relief for these injuries, however your individual requirements will be assessed by your treating practitioner.

Rest the injured arm in a high arm or hanging sling.

Follow Up Treatment

A referral will be made to the Orthopaedic Outpatients Clinic or to a private Orthopaedic surgeon for review and ongoing treatment of your injury.

If you are a Female over 45 years of age or a Male over 55 years of age and your fracture is the result of a fall from a standing height, this may indicate that you have a higher risk of osteoporosis, a disease in which the bones become fragile and brittle. If your treating practitioner has not discussed further investigations about osteoporosis, we advise that you arrange to see your general practitioner to discuss this further.

Plaster and Synthetic Cast Care

Initial Cast Care

If a cast or plaster splint has been applied you must do the following for the first 24 hours:

- Rest the arm in a sling
- Keep it elevated (eg. Sleep with your arm on a pillow)
- Check your hand for any of the following
 - Increasing pain
 - Increasing swelling
 - Numbness or tingling
 - Change in skin colour
 - Change in skin temperature

If you experience any of the above signs or symptoms please phone or return to the Emergency Department for review.

- Keep moving the fingers
- If you have a full cast, come back the following day to have your cast checked

Ongoing Cast Care

Do:

- Keep the cast dry
- Check daily for cracks, breaks or soft areas
- Exercise joints not affected
- Be aware of a loose cast when the swelling subsides; replacement may be necessary
- If in doubt seek advice

Don't:

- Get the cast wet
- Get the cast near anything hot. The cast material retains heat and may cause a burn.
- Poke objects inside your cast
- Alter or cut your cast in any way
- Carry heavy objects or lean on your cast

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Contact Numbers

Noarlunga Hospital Emergency Department 08 8384 9288

Flinders Medical Centre Emergency Department 08 8204 6065

Orthopaedic Clinic 08 8204 4787

Private Orthopaedic Surgeon

Name:	Your next review is:
Address:	
Contact number:	
Appointment Date:	If a referral has been sent to the Orthopaedic Clinic and you do
Appointment Time:	If a referral has been sent to the Orthopaedic Clinic and you do not receive an appointment time within 5 days you will need to

For more information

Emergency Department Flinders Medical Centre Flinders Drive Bedford Park SA 5042

Telephone: 08 8204 5042 www.sahealth.sa.gov.au

Emergency Department Noarlunga Hospital Alexander Kelly Drive Noarlunga Centre SA 5168







If you require this information in an alternative language or format please contact SA Health on the details provided and they will make every effort to assist you.

