

<Hospital Name>  
Emergency Department

## Torus “Buckle” Fractures Discharge Advice



Your child has suffered a ‘Torus’ or ‘Buckle’ fracture (*Break*) of their wrist.

This is the most common type of fracture in young children.

Young bone is still soft and very flexible. For this reason, instead of breaking all the way through, the bone has a small crack or kink on one side only.

This type of injury heals very well in a simple and easy to apply splint rather than a cumbersome plaster.

Most of these injuries heal perfectly well if the splint is worn for **3 weeks**.

It is important to give your child appropriate doses of paracetamol or ibuprofen to help with the pain as it will still be sore for a short period even after the application of the splint.

The splint can be removed for bathing/showering without risk to the fracture.

If after 3 weeks the wrist is a little sore and stiff after being used, the splint can be reapplied for comfort. Do this for short periods only as it is best to try to start gently using the arm as normally as possible from now on. Use a simple painkiller such as paracetamol or ibuprofen if required.

However - if after 3 weeks the wrist still seems very sore, swollen, or the child is not willing to use it contact the Fracture clinic to arrange follow-up.

If the child removes the splint before the 3 weeks and appears to be comfortable and can use the arm freely then there is no reason to force them to wear the splint for the full 3 weeks.

It is best to avoid sports and rough and tumble play when wearing the splint and for the week or two after its removal.

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

1) Fracture Clinic: <PhoneNumber>  
(<TimeAm until TimePm>, Monday to Friday)

or

2) Emergency Department:  
<PhoneNumber>(outwith these times)