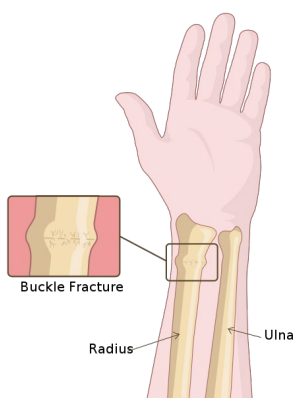


BUCKLE FRACTURE OF THE WRIST

A buckle fracture—also called a torus fracture—is a common forearm injury in children. This is a crushing of the bone cells of the distal radius, which is a bone located near the wrist on the thumb side. The envelope (cortex) of the bone is not broken, and there is no displacement of the bony parts, making the fracture stable and at very low risk of complications.

HOW IS IT TREATED ?

Removable splint is the treatment of choice for a buckle fracture. The injury heals just as quickly as with a cast, and no greater risk of aggravating the fracture is involved. Moreover, the splint makes it easier for the child to carry out activities of daily living.



Reference : ©RouDhi Wikimedia commons

IMMOBILIZATION PHASE

The removable splint must be worn day and night:

- For **3 weeks** if the child is under 5.
- For **4 weeks** if the child is age 5 or older.
- The fingers and all joints not immobilized should be moved regularly.
- Watch out for falls.
- The splint can be removed for a short period (e.g.: for bathing or showering).
- Wrist pain is expected during the first 48 hours after the fracture. If necessary, your child can be given acetaminophen (e.g.: Tylenol®, Tempra®) or ibuprofen (e.g.: Advil®, Motrin®).

REHABILITATION PHASE

Remove the removable splint on: _____

- Resume regular activities.
- Avoid activities with a risk of falls and contact sports for a further 4 weeks.
- Perform the mobility exercises (1) to (3) several times a day, ensuring that each movement is done according to the provided recommendations. Stop exercising once wrist mobility has returned to normal.

1

3 repetitions of 20 to 30 seconds



2

20 to 30 repetitions



3

20 to 30 repetitions



WHAT IS THE FOLLOW-UP ?

No medical follow-up is necessary for this type of fracture. However, if your child's pain persists beyond three weeks after the injury, consult their physician or visit a walk-in clinic. Additionally, if pain or stiffness continues 10 to 14 days after the splint is removed, seek medical advice.

WHEN TO SEEK EMERGENCY CARE ?

- Increased pain despite medication.
- Bluish discoloration of fingers.
- Numbness or reduced sensitivity in the fingers.
- Reduced finger mobility.

IF YOU HAVE ANY QUESTIONS



santeestrie.qc.ca



Info-Santé 811 OR
Check with your prescriber.

Redaction

Mme Sonia Bédard (technologue en physiothérapie, orthopédie), Dre Élisabeth Leblanc (orthopédie), Dre Fannie Péloquin (urgence) et Dre Chantal Théoret (orthopédie)

Approuvé par le Comité de développement et de suivi des ordonnances collectives et des protocoles des urgences du CIUSSS de l'Estrie-CHUS.

Revision and layout

Service des communications et des relations médias

Présidence – direction générale

© Centre intégré universitaire de santé et de services sociaux de l'Estrie –
Centre hospitalier universitaire de Sherbrooke

santeestrie.qc.ca

January 2025 – 4-6-12403 (version française) | 4-6-12404 (version anglaise)

