Buckle fractures

The paediatric virtual fracture clinic

This leaflet explains more about buckle fractures (torus) and the paediatric virtual fracture clinic. If you have any further questions, please speak to a doctor or nurse caring for you.

What is a buckle fracture?

A buckle fracture (also known as a torus fracture) is the most common type of fracture in young children's arms. A buckle fracture is an 'incomplete fracture', which means that instead of breaking completely, the bone has a small crack or kink in it. This is very common in children, whose bones are still soft and very flexible.

This type of injury heals well in a splint that is simple and easy to apply, rather than a heavy plaster cast. A buckle fracture typically heals perfectly well if the splint is worn for three weeks.

Caring for your child's fracture

Your child will be given a splint by the emergency department (A&E) to wear for three weeks following their injury. Your child's wrist will likely still be sore for a short period even after the application of the splint. The splint can be removed for bathing or showering without any risk to the fracture healing process. It is essential that you give your child appropriate doses of Paracetamol or Ibuprofen to help with their pain.

After three weeks, you can remove your child's splint. Your child's wrist may be a little sore and stiff when they use it for the first time after having their splint removed. If this happens, re-apply the splint for a few hours. It is best to start using the arm as normally as possible. Use a simple painkiller if required.
Some children do not experience significant pain, and do not need to wear their splint for the full three weeks. There is no reason to force your child to wear it if they are comfortable and not in pain.

We advise that your child avoids sports, skateboarding and rough play for up to one to two weeks after their splint is removed, and four to five weeks after their injury.

What is the paediatric virtual fracture clinic?

Your child has been referred by the emergency department (A&E) to the paediatric virtual fracture clinic. This consists of the consultant orthopaedic surgeons and the senior staff nurse.

Your child's X-ray will be reviewed by a consultant orthopaedic surgeon on a Tuesday or Wednesday. An appointment will **not** be scheduled for this as the consultant will review the X-ray themselves in clinic.

You will be contacted directly by a member of the nursing team (usually on the Thursday or Friday after the virtual clinic), to advise you on the treatment plan and to answer any questions you may have.

Please be assured that if the consultant finds anything clinically urgent, or if there are any further questions they need to ask you, they will contact you directly

Contact us

If you have any questions or concerns about your child's fracture, please contact the fracture clinic on 0207 188 9011 (Monday to Friday, 8.30am to 5pm). Out of hours, please contact the paediatric emergency department on 0207 188 2111.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit
w: www.evelinalondon.nhs.uk/leaflets

Evelina London Medicines Helpline
If you have any questions or concerns about your child's medicines, please speak to the staff caring for them or contact our helpline.
t: 020 7188 3003, Monday to Friday, 10am-5pm
e: letstalkmedicines@gstt.nhs.uk

Your comments and concerns
For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department.
t: 020 7188 8801 (PALS)   **e:** pals@gstt.nhs.uk
t: 020 7188 3514 (complaints) **e:** complaints2@gstt.nhs.uk

Language and accessible support services
If you need an interpreter or information about your care in a different language or format, please get in touch.
t: 020 7188 8815   **e:** languagesupport@gstt.nhs.uk