

Welcome to Fracture Clinic

Patient Information Leaflet



Welcome to the Fracture Clinic

This department deals with patients who have been diagnosed with a fracture within the A&E department or have been sent by their GP with a suspected fracture. This is an appointment only service. Your notes and X-rays must be available before treatments can be undertaken. In an average clinic it is common to have several doctors seeing patients with different problems. It may seem you are being called out of turn. This is because patients may have to be seen / treated by a different doctor or a technician / nurse.

The clinic is not like an ordinary outpatient clinic. It is similar to an A&E dept as we do not know what treatments are required until patients have had their consultation with the doctors.

Some treatments can take a long time and patients may need to return more than once on that day. We may for example need to take a patients cast off to remove sutures or clean and dress a wound before X-ray. On their return to clinic they may need a new cast which can extend the clinics waiting times.

We try to keep the waiting times down to an absolute minimum. Staff can only undertake treatments once the doctors have prescribed them, therefore it may appear you are being seen out of turn.

Your visit to the Fracture Clinic can last for some time. If your Fracture Clinic appointment coincides with other medical appointments, such as GP's, dentists or other appointments, it may be advisable to ask the clerk for alternative appointment.

Parents / guardians, please note, the clinic is very busy and has many dangerous pieces of equipment as well as patients in wheel chairs and on crutches / sticks.

All children must be supervised for reasons of health and safety.

Do not forget, if you require a sick note, please ask the doctors when being seen by them.

Private insurance notes / forms should be left for the doctors to complete at the end of the clinic sessions.

Please make sure your mobile phone is switched off before entry to the hospital.

M.R.I. scanning or Magnetic Resonance Imaging

When having this examination, you will be asked to lie down on a table. You will need to relax and keep still during the examination. During the scan the table enters a large tube which will vibrate slightly and make a loud knocking noise. The radiographer will watch and monitor you at all times. You will be given a buzzer to contact them at any stage of the examination.

Occasionally, to improve the quality of the scanned images , you might need to be given a small injection of colourless liquid which helps to highlight difficult areas under examination.

The MRI examination can take from 10 minutes to 1 hour to complete. Before you leave the scanning room the images will be checked to ensure that the scan is complete. No results will be known on the day. The scans are examined by the radiologist and a report is made and sent to your consultant for your next appointment.

When you receive your appointment for the MRI scan, you will be sent a more detailed information sheet, as guidance.

Ultrasound Scans

A musculoskeletal ultrasound uses high frequency sound waves which are used to obtain a cross sectional image of the area of your injury. The sound waves are emitted from a hand held transducer. These sound waves are reflected back to the same transducer and fed into a computer to be converted into images. These images are produced on to a monitor screen. The skin near the area to be examined needs to be exposed and a clear gel is applied so that the transducer has a good contact and can move smoothly along the surface of the skin.

There is no pain or discomfort during the examination only a little cool massage can be felt. Anyone can undergo an ultrasound examination, and there are no known harmful effects.

Wheelchair use

Some injuries will require you to keep your weight off both of your legs. If you require a wheelchair, ask the staff for a list of local hire shops. Do not use a wheelchair unless advised by the staff, as reduced mobility can cause poor circulation and slow down your healing

Physiotherapy treatments

Your Consultant / Doctor may advise you to have a course of Physiotherapy to aid your recovery. You will be given a blue form to take to physiotherapy department which is situated in area 'F' near to the main outpatient entrance. You should take the form with you to make an appointment for your therapy sessions. The therapy sessions will not start that day. If the distance to the Physiotherapy department is too far for you to reach, your card can be posted to the department by the clerical staff as you make your next appointment, You will then be contacted with an appointment.

Orthotics / surgical appliances

Surgical appliances are situated on the first floor near to the main outpatient clinics. They will also require you to make an appointment for you to attend the department, to be measure for your appliance and also may be necessary for you to attend a further appointment to have a fitting.

Occupational Therapists

They will advise you on how to cope with basic living tasks at home and can arrange for you to have aids to suit your needs.

Other departmental examinations

It may be necessary to send you to other departments for examinations or treatments. Unfortunately there can be a waiting list for them due to the high demand and limited appointment slots. Please be advised by your doctor or you may contact the relevant department by telephone to make enquires.

Diabetes

Patients with Diabetes should bring their own medicines and or food / drink in the event that their wait is extended during their visit to the clinic. There is a Café you can visit, situated down the main corridor at the East entrance of the acute block.

Transport

Patients who use the ambulance / hospital car services may experience delays as they wait to be picked up for their journey home.

Useful contact numbers

Fracture Clinic appointments:- 0161 291 6131.

Treatment room:- 0161 291 6138.

Accident and Emergency Dept:- 0161 291 6003 / 4.

Physiotherapy Dept:- 0161 291 2178.

Orthotics / Surgical Appliances:- 0161 291 2431.

Main Hospital / all other depts:- 0161 998 7070.

Patients who are having problems with their casts / injury, must telephone for advice and / or for an appointment.

When you telephone the hospital you will need to give:

Your full name, your hospital number.....
your consultant, and your last and or next appointment date.
Extra information may be required, date of birth your address and GP.
This information will help the contact to assist you in completing your enquiries.

The Fracture Clinic is not a drop in centre, but is run on an appointment system only. You must telephone for an appointment before arrival.

Always bring your appointment card with you when you visit the clinic.

Frequently asked questions

Q: - The doctor / nurse in A&E told me I had broken / cracked my bone but now I have been told it's fractured, why?

A:- A broken, cracked or fractured bone means the same thing, except the word fracture is used as a medical / technical term by the staff in the Fracture clinic. There are many types of fractures when a broken bone diagnosed.

Q:- The doctor I first saw, said that I might need pins / surgery, but I have now been told that I do not need it, why?

A:- You have been sent to fracture clinic to be seen by a specialist in the treatment of fractures and his / her experience will determine the course of your treatment.

Q:- My relative / friend, broke the same bone and they did not have this treatment, why do I not have the same as they did?

A:- Never listen to any one else's experiences, everyone is an individual and has different needs and healing times.

Q:- The cast I have is in a strange position, has it been set correctly?

A:- Sometimes we need to set your fracture in odd positions in order to try and stop a fracture getting worse, or to help it keep in the correct position to heal.

Walking Aids

All walking aids are issues by staff from the physiotherapy department. The therapist will assess you and give you the correct size aid.

How to use a walking stick

If you require a walking stick, it will be measured to suit you. Hold the stick in the opposite hand to your injured / bad leg. Stand as straight and as normal as possible. You then move your stick and bad leg forwards at the same time. Then you step forward and through with your good leg, using the stick to take some weight off your bad leg. This will enable you to maintain a normal walking pattern. You may find that your muscles ache in the opposite leg, hands and back. This is due to using parts of your body more than usual.

How to use Crutches

If you are told to keep all your weight off your bad leg, you will be given a pair of crutches. You must always stand up on the good leg before put your arms through the crutches. When you are going to sit down, you must firstly remove your arms from the rings of the crutches. This method is used because if loose your balance, your hands are free to help you to prevent any further injuries. When advised to part weight bear on your bad leg, you will need to still take weight through your hands. Always take time, do not rush, pace yourself. To use the stairs there must be a hand rail on one side and use a crutch on the other. Start with your good leg on the step. Place weight through your hands, now lift your bad leg and crutch to the same step and go up the stairs one at a time.

Tips

- If you find that your hands are sore, try to find a pair of padded mitten gloves as used by cyclists or weight trainers. This is far better than trying to pad the handles of the crutches.
- Wear a trainer or laced shoe that gives your good foot support also.
- Avoid flip flops, slippers, these are unsafe to use.
- To keep your balance at a mirror / wash basin, if your cast goes up to your knee you can use a chair or a stool by bending your knee and resting it down on the seat.

Using a frame is very similar to using crutches, but never to be used on the stairs. Do not step in to the frame too closely as you may loose your balance.

Please return all walking aids, as soon as possible after finishing with them.

How long does it take for my break to heal?

An approximation for the average adult healing times is as follows:-

Adult arm, small bone =	3 – 4 weeks
Adult arm, long bone =	6 – 8 weeks
Adult leg, small bone =	4 – 6 weeks
Adult leg, long bone =	12 – 16 weeks

There are other fractures that will influence times to heal, such as types of fracture, soft tissue damage, your genetic make up, general health and diet.

Children tend to take approximately half the time of an adult.

The bone healing process:-

When you fracture a bone the healing process takes place in 4 main stages:-

- 1 The bone bleeds at its broken ends and forms a haematoma (clot) in and around the break and surrounding soft tissues.
This is why you can see swelling and bruising around the injury.
- 2 The haematoma becomes quite firm and helps to stabilise the gap in the bone forming an initial bridging connection.
- 3 The initial haematoma becomes more fibrous and surrounds the fracture site forming a stronger connection between the gap and any fragments.
- 4 New bone cells gather around the fracture to form a stronger connection. This over time reforms and smoothes out to the shape of your bone.

Q:- Why am I not allowed to put weight on my leg yet ?

A:- Some fractures are unstable and may have a tendency to move out of Position if you were to walk on it. If this occurs it often means you will Need to have it manipulated or have an operation to correct its position.

Q:- Ever since I have had the cast on my pain is worse.

A:- Any injury does have a tendency to feel worse for a few days after your accident, it should slowly start feeling better over the following week, then it is always best to follow the instructions and information given so we can monitor your progress.

Q:- Why have I not had an x-ray today ?

A:- X-rays are used as away of telling us what type of fracture you have suffered, which in turn will help us decide what course of treatment you will require.
Certain fractures do not always need X-rays with every visit. Severe fractures need to be monitored for position checks and evidence of healing. You should only have X-rays if it needed for the above reasons.

Q:- I have been asked to exercise my fingers and make a tight fist, but it really hurts and I do not want to make things worse.

A:- It is very important to exercise your fingers and thumb and make a fist, this will stimulate your blood supply, which will help reduce the swelling, that is the cause of your pain and provide a healthy supply of blood to encourage new bone to form over the fracture it.

Q:- Why has my broken bone not healed yet ?

A:- Many factors determine your healing times, your age, your genetics the type of fracture you have, where your fracture is, your diet and lifestyle, if you smoke or drink alcohol and co-operation with medical advice and self help.

Q:- I have been doing as I am told and its still not getting better.

A:- Some injuries take longer to settle down, we do monitor a patients progress. Night time is always highlighted by increased discomfort and pain especially if you have been busy or active all day. The injury does tend to let you know when it is tired.

Q:- I think my cast has been removed too soon, I can not use my hand / foot. It's become hot and red, painful and swollen.

A:- Sometimes when the cast is removed the patient has problems when they begin to use their injured limb for the first time. The injured limb has been locked in the same position by the cast and when this is removed the soft tissues, which have not been used for quite some time, begin to ache. They will settle down in time, you just need to pace yourself, rest a little, and then try again. Do not let your limb stiffen up again, use painkillers to help you through this rehabilitation period.

Q:- Why have I not had any Physiotherapy ?

A:- Not everyone needs to have physiotherapy. Self-help is usually all that is required. It is often a sign of how confident the doctor is of your early recovery, when no physiotherapy is required.

Q:- Can I drive my car or operate machinery while I have a cast or splint.

A:- No. You have a disability; you are not insured, any sudden pain could cause you to have an accident and you would be breaking the law.

Q:- I have large metal plates and screws on my fracture, if I go through the airport metal detector, will it cause it to go off ?

A:- No, not normally, however some new airport detectors are now more powerful and could be set off. If this occurs you just need to inform the airport security staff of your operation.

Q:- I have now been told that I have Arthritis, but I never suffered from it before ?

A:- As we age we all have some wear and tear of the joints. When you have a fall and suffer an injury it can often cause Arthritis to flare up. This added pain could cause your recovery to take a little longer with more pain than normal.

Q:- Will my arm / leg be weaker where I have had my fracture ?

A:- This depends on any other medical conditions, your age, the type of fracture and your own healing. Your fracture can be a little weaker for sometime, 6-12 months or so. But after this period, as time passes, your fracture is usually as strong as normal for your own bone type.