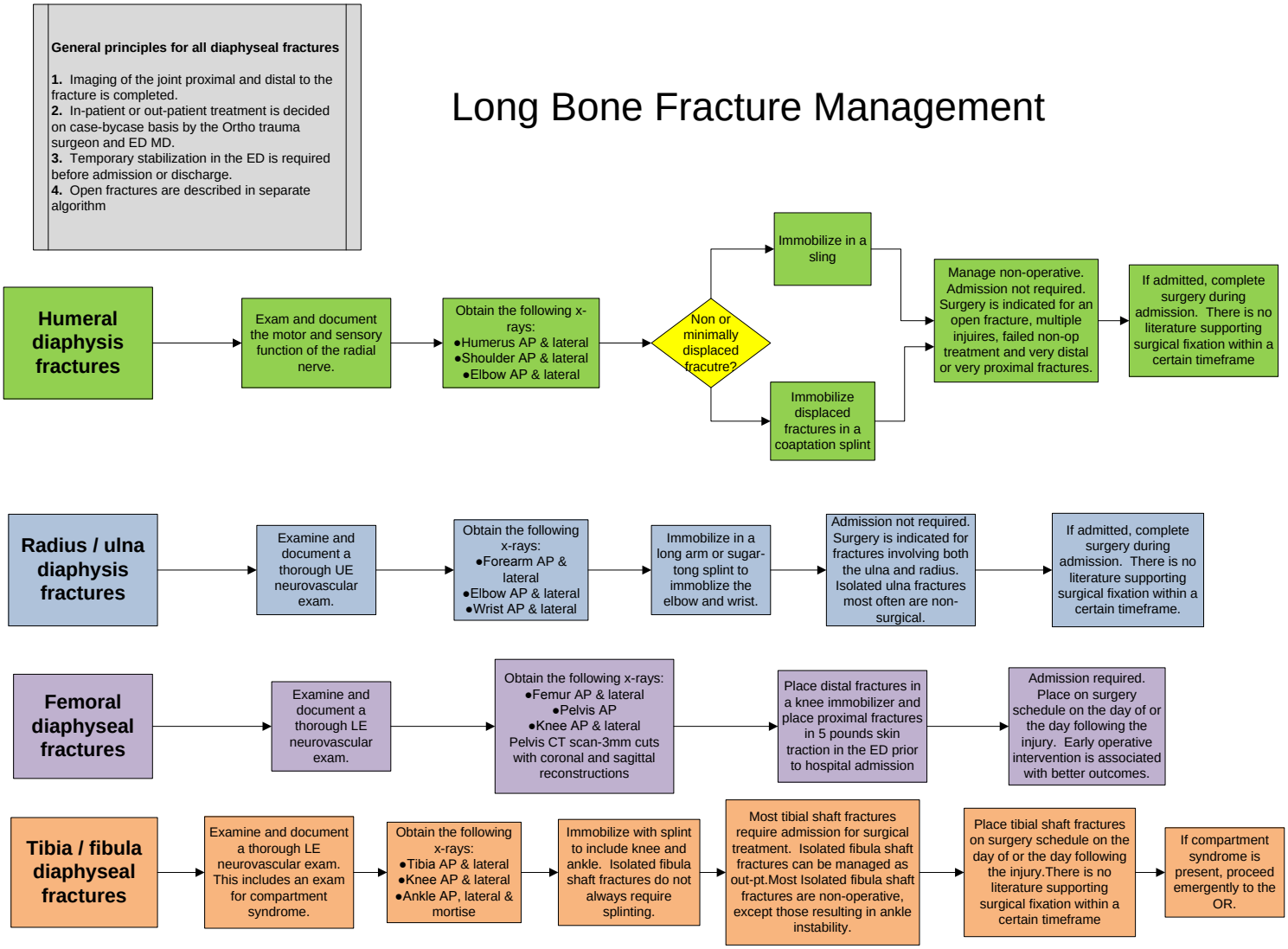
Approved by: Trauma Services Committee

DEPARTMENT: Algorithm	**POLICY TITLE: Long Bone Fracture Guideline**
Page 1-2	**REPLACES POLICY DATED: 2/2016**
EFFECTIVE DATE: 09/2016	**REFERENCE NUMBER: ALG-18**

PURPOSE: To provide a framework for management of the patient with long bone fractures including Humeral Shaft Fractures, Radius/Ulna Fractures, Femoral Shaft Fractures and Tibia/Fibula Shaft Fractures.

POLICY:



These guidelines are designed for the general use of most patients, but may need to be adapted to meet the special needs

of a specific patient as determined by the patient's care giver.

References:

Sarmiento A, Zagorski JB, Zych GA, Latta LL, Capps CA. Functional bracing for the treatment of fractures of the humeral diaphysis. *J Bone Joint Surg Am*. 2000 Apr;82(4):478-86. PubMed PMID: 10761938.

[2] Tornetta P 3rd, Kain MS, Creevy WR. Diagnosis of femoral neck fractures in patients with a femoral shaft fracture. Improvement with a standard protocol. *J Bone Joint Surg Am*. 2007 Jan;89(1):39-43. PubMed PMID: 17200308.

[3] Even JL, Richards JE, Crosby CG, Kregor PJ, Mitchell EJ, Jahangir AA, Tressler MA, Obremskey WT. Preoperative skeletal versus cutaneous traction for femoral shaft fractures treated within 24 hours. *J Orthop Trauma*. 2012 Oct;26(10):e177-82. PubMed PMID: 22430522.

[4] Bone LB, Johnson KD, Weigelt J, Scheinberg R. Early versus delayed stabilization of femoral fractures. A prospective randomized study. *J Bone Joint Surg Am.* 1989 Mar;71(3):336-40. PubMed PMID: 2925704.

[5] Park S, Ahn J, Gee AO, Kuntz AF, Esterhai JL. Compartment syndrome in tibial fractures. *J Orthop Trauma*. 2009 Aug;23(7):514-8. doi: 10.1097/BOT.0b013e3181a2815a. PubMed PMID: 19633461.