# Procedures: Splinting

NORTHWESTERN EM ORTHO CURRICULUM

# **Indications for Splinting**

- Acute arthritis, including acute gout
- Severe contusions and abrasions
- Skin lacerations that cross joints
- Tendon lacerations
- Tenosynovitis
- Puncture wounds/bites to the hands, feet, and joints
- Fractures and sprains
- Reduced joint dislocations

# Splinting Equipment

- Stockinette
- Splinting material
  - o Plaster of Paris (at NMH)
    - Strips or rolls (2-, 3-, 4- or 6-inch widths)
  - Prefabricated Splint Rolls
    - × Plaster
    - ▼ Fiberglass with polypropylene padding (at CMH)
- Padding (Webril)
- Ace Wrap
- Bucket/receptacle of warm water
- Trauma sheers

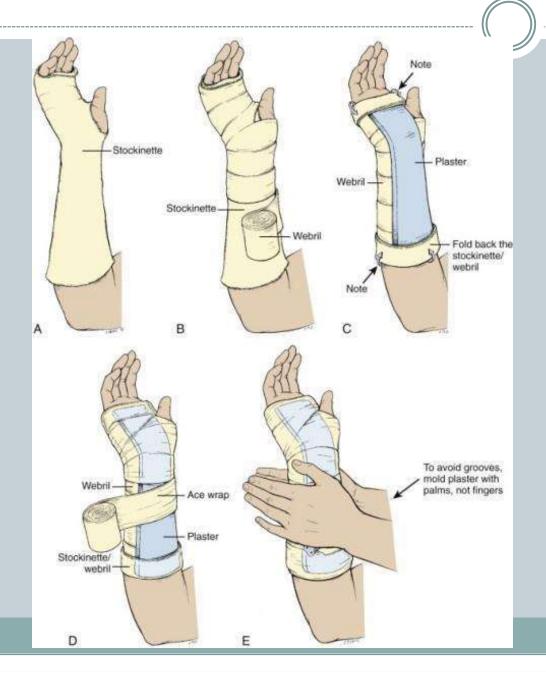
### Plaster Preparation

- Length: Measure out the dry splint at the extremity to be splinted
  - o remember the plaster shrinks slightly when wet, if too long, the ends can be folded back
  - Use plaster width that is slightly greater than the diameter of the limb
  - Can be measured on the contralateral extremity to avoid excessive manipulation of the injured extremity

### • Thickness:

- o UE: 8-10 layers
- o LE 10-12 layers

# General Splinting Procedure



- 1) Stockinette is applied
- 2) Webril is applied
- 3) The wet plaster is positioned
- 4) Elastic bandage is applied
- 5) The plaster is molded

# General Splinting Procedure

- Measure and prepare the plaster
- Apply the stockinette so that it extends 2 or 3 inches beyond the plaster
- Apply 2 or 3 layers of Webril over the area to be splinted
  - o Be generous
  - Avoid wrinkles
  - Place extra padding around bony prominences
  - Place Webril between digits that are going to be splinted to avoid maceration
- Wet the plaster and place it over the area to be splinted
  - o Submerge the premeasured plaster in unused warm water
  - Remove the splint from the water and squeeze out the excess water and remove wrinkles
- Fold the ends of stockinette over the the plaster to smooth the edges of the splint

# General Splinting Procedure (cont'd)

- Place a layer of Webril over the plaster
- Apply the ace wrap around the splint to secure it in place
  - Unwrap the bandage without placing too much tension around the extremity
- While still wet, mold the plaster to conform to the shape of the extremity
  - o Use the palms of your hand rather than the fingers
- Place the patient's extremity in the position desired
  - o Keep the patient still until the splint has dried and hardened (the plaster will become warm as it's drying)
  - o Fast-drying: 5-8 minutes
  - Extra-fast drying: 2-4 minutes
- After the splint has dried, check the splinted extremity for function, arterial pulse, capillary refill, temperature of skin, and sensation

### Specific Splints

### **Upper Extremity**

- Long arm posterior splint
- Double sugar tong splint
- Volar splint
- Sugar tong splint
- Thumb spica splint
- Ulnar gutter splint
- Radial gutter splint
- Finger splints

### **Lower Extremity**

- Posterior knee splint
- Jones compression dressing
- Posterior ankle splint
- U-splint/stirrup splint

# Long Arm Posterior Splint

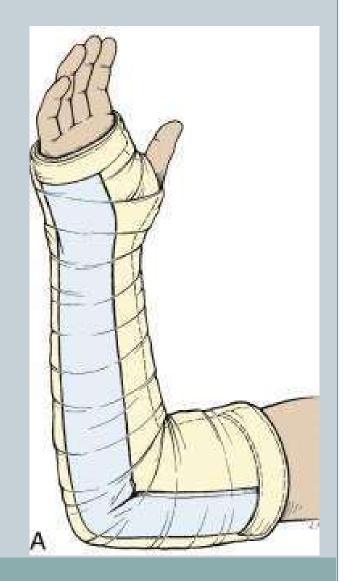
#### Indications

o Injuries of the elbow and proximal forearm

#### Construction

- Starts on the posterior aspect of the proximal arm
- o Down the ulnar aspect of arm
- Ends at the MCP joints

- Cut hole in stockinette for thumb
- o Elbow at 90 degrees
- Forearm neutral position with thumb up
- Neutral or slightly extended wrist (10 -20 degrees)



# Double Sugar Tong

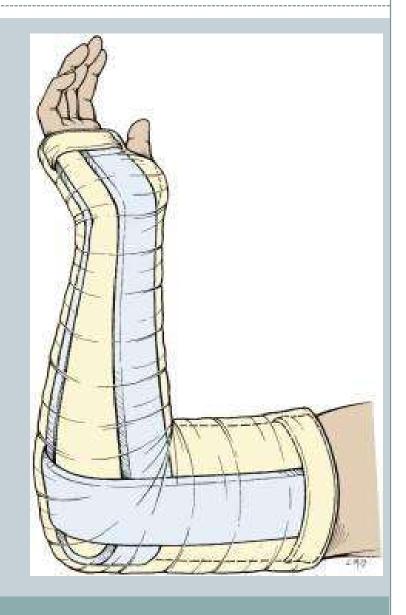
### Indications

 Complex and unstable forearm and elbow fractures

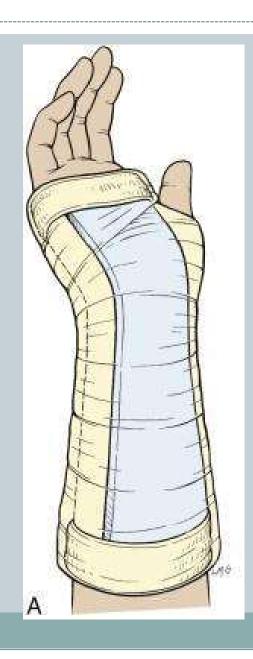
#### Construction

- Forearm splint –from MC heads on the dorsal hand, around elbow to volar MCP joints
- Arm splint from anterior proximal humerus, around elbow, to posterior arm to prox humerus

- Cut hole in stockinette for thumb
- Elbow at 90 degrees
- o Forearm neutral with thumb up
- Slightly extended wrist (10 -20 degrees)



### Volar Splint



### Indications

- Soft tissue injuries of the hand and wrist
- Carpal bone fractures, 2<sup>nd</sup> 5<sup>th</sup> MC head fractures

#### Construction

o Starts in the palm at the MC heads, down the volar aspect of forearm to distal forearm

- Cut hole in stockinette for thumb
- o Forearm in neutral position with thumb up
- Wrist slightly extended (10-20 degrees)

# Sugar Tong Splint

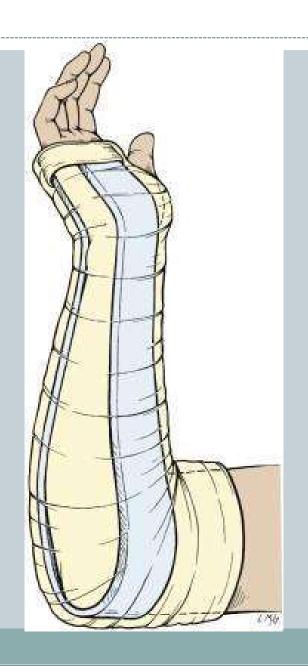
#### Indications

Distal radius and ulna fractures

#### Construction

o From MC heads on the dorsal hand, around elbow to volar MCP joints

- Cut hole in stockinette for thumb
- o Elbow at 90 degrees
- o Forearm neutral with thumb up
- Slightly extended wrist (10 -20 degrees)



# Thumb Spica Splint



#### Indications

- Injuries to scaphoid, lunate, thumb and 1<sup>st</sup> metacarpal
- o Gamekeeper's thumb
- De Quervain tenosynovitis

### Construction

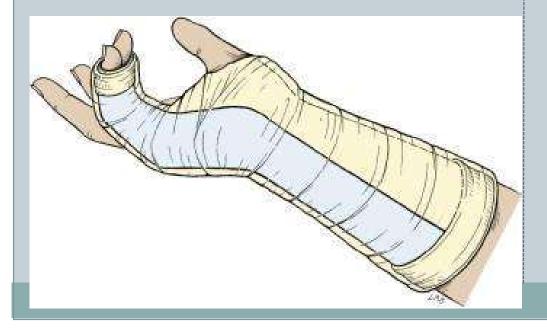
 From just distal to the interphalangeal joint of thumb to mid-forearm

- Cut hole in stockinette for thumb
- Forearm in neutral position with thumb in wineglass position

### Ulnar Gutter Splint

#### Indications

- Fractures and soft tissue injuries of 5<sup>th</sup> digit
- Fractures of the neck, shaft, and base of 4<sup>th</sup> and 5<sup>th</sup> metacarpals.



#### Construction

- Starts at mid-forearm, runs along ulnar aspect of forearm to just beyond the DIP joint
- o Include the 4<sup>th</sup> and 5<sup>th</sup> digits

- Forearm in neutral
- Slight wrist extension (10-20 degrees)
- PIP and DIP joints 10-15 degrees of flexion
- 50 degrees of flexion of MCP joints
- If Boxer's fracture -> MCP joint flexed to 90 degrees

# Radial Gutter Splint

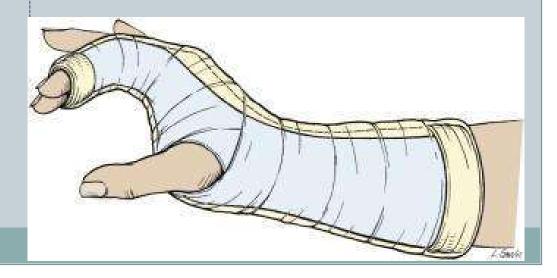
#### Indications

- Fractures and soft tissue injuries of index and 3<sup>rd</sup> digits
- Fractures of the neck, shaft and base of the 2<sup>nd</sup> and 3<sup>rd</sup> metacarpals

#### Construction

 Starts at mid-forearm, down the radial aspect of forearm to just distal to the DIP joint of 2<sup>nd</sup> and 3<sup>rd</sup> digits

- Cut hole in stockinette and plaster for the thumb
- Hand in position of function
- Forearm in neutral position
- Wrist slightly extended
- MCP 50 degrees of flexion
- PIP and DIP joints 5 to 10 degrees of flexion



# Finger Splints

- Buddy tape
  - Indications: minor finger sprains

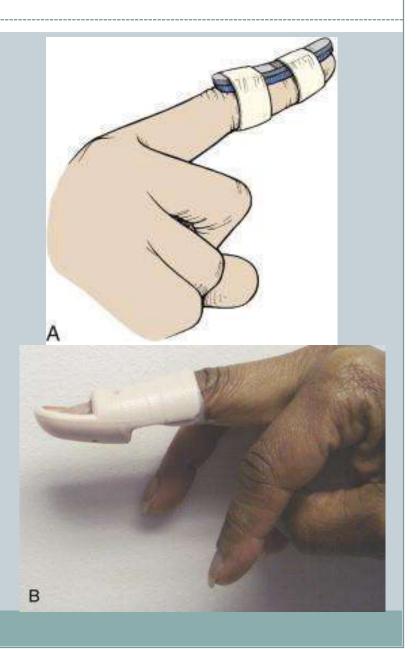


- Aluminum finger splints
  - Phalanx fractures
  - After tendon repairs

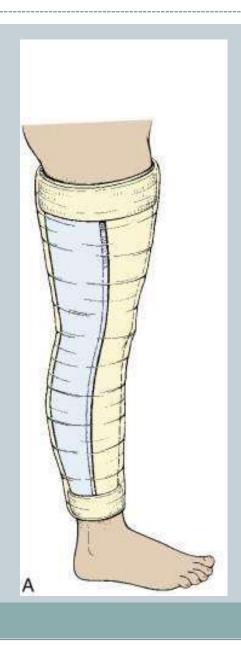


# Finger Splints for Mallet Finger

- Indication
  - Mallet Finger
- Construction
  - Splint only the DIP joint
- Application/Positioning
  - Splint DIP joint in hyperextension
  - o Cannot be removed for 6-8 weeks



### Posterior Knee Splint



#### Indications

- Patients with legs too large for knee immobilizer
- Angulated fractures
- o Injuries that require urgent operative fixation

#### Construction

o Starts just below buttocks crease on dorsal aspect of leg to 5 to 8 cm above the malleoli

### Application/Positioning

 Slightly flexed knee (especially in kids so they don't bear weight)

### Jones Compression Dressing

#### Indications

- Short-term immobilization of soft tissue injuries of knee
- Not for injuries that require strict immobilization

#### Construction

- Webril and Ace wrap from the groin to a few inches above the malleoli
- o 2 to 3 layers of webril

### Application

Slight flexion of the knee

### Posterior Ankle Splint (Post Mold)

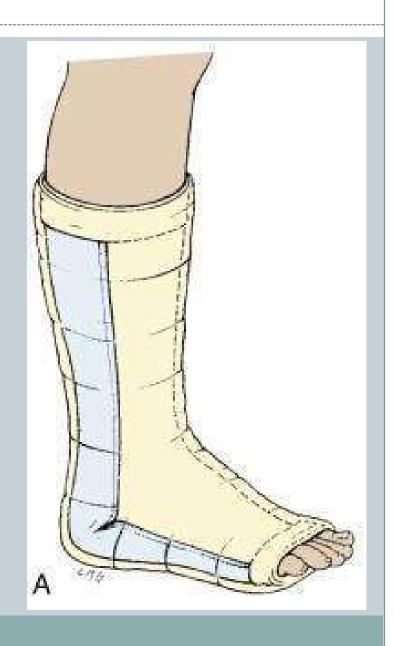
#### Indications

- Severe ankle sprains
- Fractures of distal fibula and tibia
- Reduced ankle dislocations
- Can add stirrup splint for unstable ankle fractures

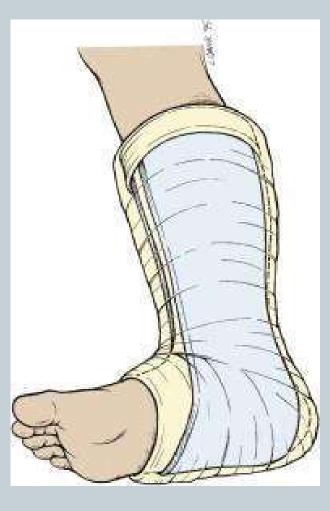
#### Construction

 From plantar surface of the metatarsal heads to the level of the fibular head posteriorly

- Most easily applied in the prone position
- Ankle to 90 degrees



# U-Splint/Stirrup Splint



### Indications

- Severe ankle sprains
- Fractures of distal fibula and tibia
- Reduced ankle dislocations
- Can be added to post mold for unstable ankle fracture

#### Construction

 Passes under the plantar surface of foot and extends up medial and lateral sides of leg to just below level of fibular head

- Most easily applied in the prone position
- Ankle to 90 degrees
- If placed with post mold, place post mold first