



# Rigid Splint - Long Bone Injury

EMT-Basic

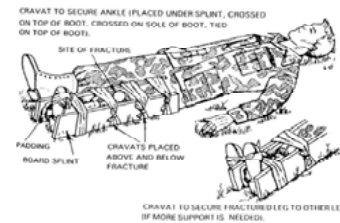
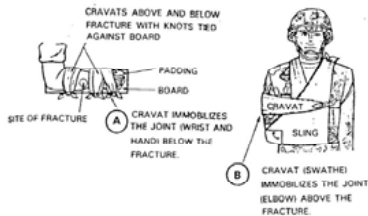
Advanced EMT

Paramedic

## PROCEDURE

- Remove overlying clothing or jewelry obstructing assessment of the injured bone
- Cover any open wound with sterile dressing, control bleeding; support injured site during process
- Check distal circulation, sensation and movement (CSM)
- Only attempt to realign injury if CSM is not present, otherwise splint in position found**
  - Realignment should be proceeded by pharmacological pain control if possible
  - To perform realignment, stabilize the joint above and below the injury
  - Apply gentle traction to the distal extremity in the direction it is facing
  - While maintaining traction, move the distal extremity back towards its anatomical position.
  - Stop immediately if significant resistance or pain is detected OR when anatomical position is achieved
  - Check the distal circulation, sensation, and movement (CSM)
- If resistance is felt when attempting to straighten, stop attempting and splint in position found
- Apply the rigid splint to the extremity, extending from the joint above the injury site to the joint below the injury site
- Secure splint to the extremity with a bandage
- Check the distal circulation, sensation, and movement (CSM) after splinting and frequently thereafter
- Loosen the bandage on the splint if necessary to maintain circulation
- A sling and swathe may be used to further support upper extremity injuries

## REFERENCE GRAPHICS



## KEY POINTS

- Due to habitus and anatomy of patients, splinting may need a creative approach to stabilizing injuries
- Document findings of CSM assessments in ePCR and verbalize during transfer of care, noting any changes after splinting

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