



# SAGER TRACTION SPLINT



## Escambia County, Florida - ALS/BLS Medical Protocol

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To provide a means to splint fractures that will provide anatomical alignment, fracture stability and pain relief in long bone fractures.

### APPLICATION

- A. Assemble two person team.
- B. Check distal pulses and sensation (be certain to document the presence/ absence of pulses and sensation).
- C. One team member may maintain slight manual traction on the fractured leg. Check distal pulses and sensation (document again).
- D. Assemble the splint and adjust to the proper length. Adjust the ankle strap to the approximate size of the patient's ankle.
- E. Place the padded brace between patient's legs, resting the ischial perineal cushion against the ischial tuberosity. Avoid undue pressure on external genitalia. Apply the abductor bridle (thigh strap) around the upper thigh of the fractured leg and tighten firmly. The perineal area and the area under the abductor strap may be padded with a towel for comfort and to minimize pressure over the femoral vessels. Extend the inner shaft of the Sager until the crossbar rests adjacent to the patient's heels.
- F. Position the malleolar (ankle) harness beneath the heel(s) and around the ankle(s). Secure these snugly.
- G. Shorten the loop straps on the harness to ensure that the cable ring is secure up against the foot.
- H. Grasp the shaft with one hand and the traction bar with the other hand, gently extend the inner shaft until the desired amount of traction is obtained on the calibrated scale located on the wheel. The correct amount of traction would be approximately 10% of body weight to a maximum of 15 pounds.


If more traction is indicated, contact on-line Medial Control.



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- I. Posterior to the knees, gently slide the largest elastic cravat through and upwards to the thigh, repeating with the smaller elastic cravats to minimize lower and mid-limb movement.
- J. Re-tighten the adductor bridle (thigh strap) at the upper thigh and firmly secure the three elastic cravats.
- K. Apply pedal binding (figure eight strap) to feet.
- L. Check and document pedal pulses and sensation.
- M. Consider elevating the extremity. Stabilize extremity to backboard or stretcher (be certain that splint does not extend past backboard or stretcher to avoid contact with door).



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