Assessment

A. Assure ABCs, see General Supportive Care Protocol.

B. Obvious or suspected fractures and/or dislocations.

Treatment

A. Remove appropriate clothing in order to fully inspect the extremities for any significant injuries.

B. Assess neurovascular status.
   1. If obvious fracture or dislocation is present and pulses are absent, attempt to reduce the injury to the normal or approximate anatomical location.
   2. Immediately reassess neurovascular status.

C. Cover open fractures with sterile dressing and secure with tape or bandage.

D. Splint as appropriate, immobilize the joint above and below the fracture; immobilize the bone above and below any dislocations.

E. Severely angulated mid-shaft fractures may be straightened by gentle, continuous traction if necessary for immobilization and/or extrication.

F. Injuries of the joint should be immobilized in the position found.

G. With open fractures, retraction of bone ends is not desired, but may be required for secure immobilization.

H. Pad splint to prevent pressure points.

I. Do not apply ice or cold packs directly to the skin.

J. Fractures of the long bones or of the pelvis can be significant enough to cause shock.
K. When in doubt-splint.

L. Reassess continuously the circulatory and neurological status after splinting.

Report

A. Report as indicated in General Supportive Care Protocol.