

## **Distal Radius Buckle (Torus) Fracture Emergency Department & Urgent Care**

## **Center for** Clinical Excellence

#### **Inclusion Criteria:**

Patients presenting to a UC or ED with radiology impression identifying isolated distal radius "buckle fracture"

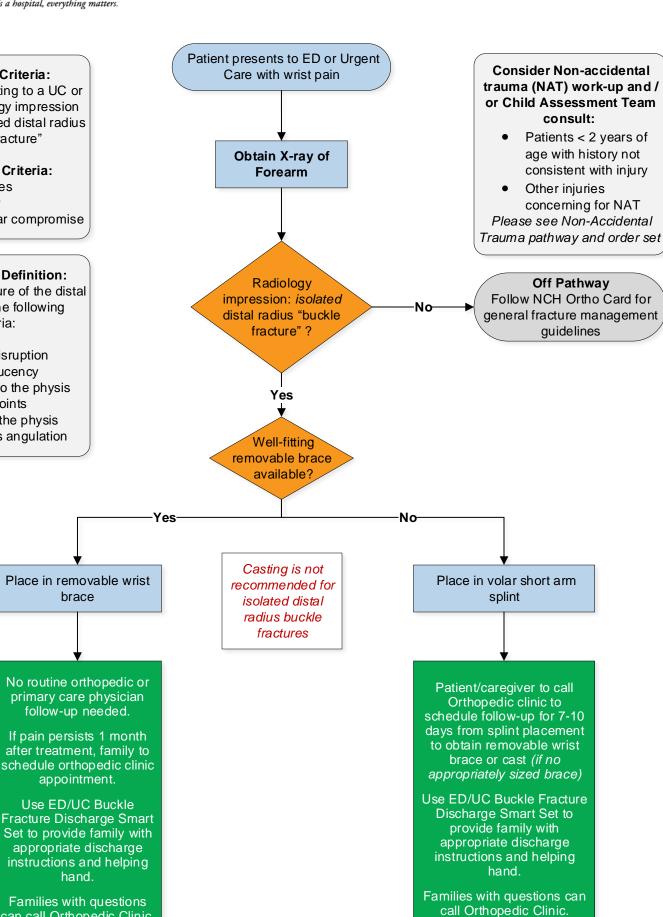
#### **Exclusion Criteria:**

- Open fractures
- Concerns for neurovascular compromise

#### **Diagnosis & Definition:**

Incomplete fracture of the distal radius with the following criteria:

- No cortical disruption
- No fracture lucency extending into the physis
- 2 inflection points
- > 1 cm from the physis
- < 10 degrees angulation



brace

follow-up needed.

appointment.

hand.

can call Orthopedic Clinic.

## **Quality Measures**

#### Goals:

- Reduce unnecessary routine orthopedic or primary care physician follow-up for isolated closed distal radius buckle fractures managed with a removable splint.
- Improve patient and family satisfaction with injury management by encouraging use of removable splints compared to volar arm splints

#### **Process Measure:**

ED/UC Smart Set utilization

#### **Outcome Measure:**

Percent of patients with an isolated closed distal radius buckle fracture managed with a removable splint and, of those, percent with recommended orthopedic or primary care physician clinic follow-up at time of initial injury

### **Balancing measure:**

Percent of patients managed with a removable splint who required cast application within 3-6 weeks

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# **Pathway Team & Development**

## **Pathway Development Team:**

Leaders:

Orthopedics:

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Lynne Ruess, MD

Emergency Medicine:

Berkeley Bennett MD, MS Laura Rust, MD, MPH

Members:

Orthopedics:

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## **Clinical Pathways Program:**

Medical Director - Emergency Medicine:

Berkeley Bennett, MD, MS

Medical Director - Associate Chief Quality Officer, Center for

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Laura Rust, MD, MPH

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Program Coordinator:

Tahje Brown, MBA

## **Clinical Pathway Approved:**

Medical Director - Associate Chief Quality Officer, Center for Clinical Excellence:

Ryan Bode, MD, MBOE

Advisory Committee Date: September, 2022

Origination Date: September, 2022 Last Revision Date: September, 2025

## **Clinical Pathway Development**

This clinical pathway was developed using the process described in the NCH Clinical Pathway Development Manual Version 6, 2022. Clinical Pathways at Nationwide Children's Hospital (NCH) are standards which provide general guidance to clinicians. Patient choice, clinician judgment, and other relevant factors in diagnosing and treating patients remain central to the selection of diagnostic tests and therapy. The ordering provider assumes all risks associates with care decisions. NCH assumes no responsibility for any adverse consequences, errors, or omissions that may arise from the use or reliance on these guidelines. NCH's clinical pathways are reviewed periodically for consistency with new evidence; however, new developments may not be represented, and NCH makes no guarantees, representations, or warranties with respect to the information provided in this clinical pathway.

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> For more information about our pathways and program please contact: ClinicalPathways@NationwideChildrens.org

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# **Key References**

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