Treating Fractures, Dislocations, Sprains, and Strains

- Objective: Immobilize the injury and joints above and below the injury.
- If questionable, treat as a fracture.

Dislocations
Dislocations are another common injury in emergencies.

A dislocation is an injury to the ligaments around a joint that is so severe that it permits a separation of the bone from its normal position in a joint.

The signs of a dislocation are similar to those of a fracture, and a suspected dislocation should be treated like a fracture.

You should not try to relocate a suspected dislocation. Immobilize the joint until professional medical help is available.

Signs of Sprain:
- Tenderness at injury site
- Swelling and/or bruising
- Restricted use or loss of use
  Immobilize and elevate.

Splinting is the most common procedure for immobilizing an injury.
Cardboard is the material typically used for “makeshift” splints but a variety of materials can be used, including:

- Soft materials. Towels, blankets, or pillows, tied with bandaging materials or soft cloths.
- Rigid materials. A board, metal strip, folded magazine or newspaper, or other rigid item.
- Anatomical splints may also be created by securing a fractured bone to an adjacent unfractured bone. Anatomical splints are usually reserved for fingers and toes but, in an emergency, legs may also be splinted together.

Guidelines for Splinting:
1. Support the injured area.
2. Splint injury in the position that you find it.
3. Don't try to realign bones.
4. Check for color, warmth, and sensation.
5. Immobilize above and below the injury.
Splinting Using a Blanket

Splinting using a blanket in which the victim's legs are immobilized by tying blankets at intervals from mid-thigh to feet.

Splinting Using a Towel

Splinting using a towel, in which the towel is rolled up and wrapped around the limb, then tied in place.

Pillow Splint

Pillow splint, in which the pillow is wrapped around the limb and tied.