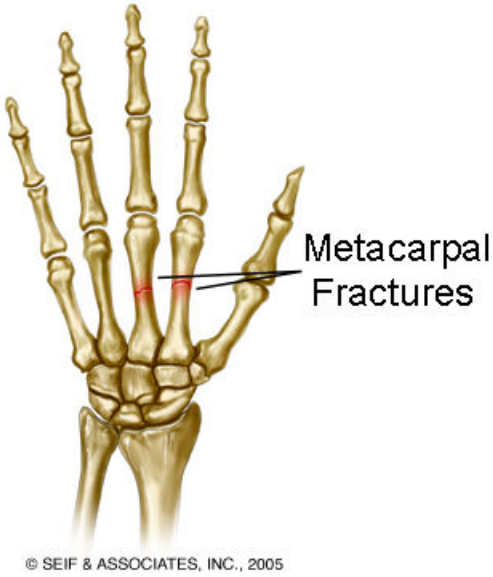
Metacarpal Fractures
(Break in Bones of Hand)

Fractures of metacarpals are breaks in the bones of the hand. They extend from the knuckles to the wrist. These bones can undergo many types of fractures. There are different ways of treating these fractures, all of which may be correct.



TREATMENT

Hand fractures can be treated with:

- **Non-reduction -** The fracture is casted without changing the positions of the *fracture* (bone pieces) involved. This fracture is usually left in a cast for 4 to 6 weeks or as your caregiver thinks necessary.
- **Closed reduction -** The bones are moved back into position without surgery and then casted.
- **ORIF** (open reduction and internal fixation) - The fracture site is opened and the bone pieces are fixed into place with some type of hardware, such as screws, etc. They are then casted.

Your caregiver will discuss the type of fracture you have and the treatment that should be best for that problem. **If surgery is chosen,** let your caregivers know about the following.

LET YOUR CAREGIVERS KNOW ABOUT THE FOLLOWING:

- Allergies
- Medications you are taking, including herbs, eye drops, over the counter medications, and creams
- Use of steroids (by mouth or creams)
- Previous problems with anesthetics or novocaine
- Possibility of pregnancy
- History of blood clots (thrombophlebitis)
- History of bleeding or blood problems
- Previous surgeries
- Other health problems

FOLLOWING SURGERY

After surgery, you will be taken to the recovery area where a nurse will watch and check your progress. Once you are awake, stable, and taking fluids well, barring other problems, you'll be allowed to go home. Once home, an ice pack applied to your operative site may help with pain and keep the swelling down.

HOME CARE INSTRUCTIONS

- Follow your caregiver's instructions as to activities, exercises, physical therapy, and driving a car.
- Daily exercise is helpful for keeping range of motion and strength. Exercise as instructed.
- To lessen swelling, keep the injured hand elevated above the level of your heart as much as possible.
- Apply ice to the injury for 15 to 20 minutes each hour while awake for the first 2 days. Put the ice in a plastic bag and place a thin towel between the bag of ice and your cast.
- Move the fingers of your casted hand several times a day.
- If a plaster or fiberglass cast was applied:
  - Do not try to scratch the skin under the cast using a sharp or pointed object.
  - Check the skin around the cast every day. You may put lotion on red or sore areas.
  - Keep your cast dry. Your cast can be protected during bathing with a plastic bag. Do not put your cast into the water.
- If a plaster splint was applied:
  - Wear your splint for 1 week or as directed or until seen again.
  - Do not get your splint wet. Protect it during bathing with a plastic bag.

- You may loosen the elastic bandage around the splint if your fingers start to get numb, tingle, get cold or turn blue.
- Do not put pressure on your cast or splint; this may cause it to break. Especially, do not lean plaster casts on hard surfaces for 24 hours after application.
- Take medications as directed by your caregiver.
- Only take over-the-counter or prescription medicines for pain, discomfort, or fever as directed by your caregiver.
- Follow-up as provided by your caregiver. This is very important in order to avoid permanent injury or disability and chronic pain.

SEEK MEDICAL CARE IF:

- Increased bleeding (more than a small spot) from beneath your cast or splint if there is beneath the cast as with an open reduction.
- Redness, swelling, or increasing pain in the wound or from beneath your cast or splint.
- Pus coming from wound or from beneath your cast or splint.
- An unexplained oral temperature above 102° F (38.9° C) develops, or as your caregiver suggests.
- A foul smell coming from the wound or dressing or from beneath your cast or splint.
- You have a problem moving any of your fingers.

SEEK IMMEDIATE MEDICAL CARE IF:

- You develop a rash
- You have difficulty breathing
- You have any allergy problems

If you do not have a window in your cast for observing the wound, a discharge or minor bleeding may show up as a stain on the outside of your cast. Report these findings to your caregiver.

MAKE SURE YOU:

- Understand these instructions.
- Will watch your condition.
- Will get help right away if you are not doing well or get worse.

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