

Mid-Shaft Clavicle Fracture

Information for patients

Virtual Fracture Care Team: Shared Care Plan

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This is a follow-up letter to your recent telephone consultation with the Virtual Fracture Care Team explaining the ongoing management of your injury. Your case has been reviewed by an Orthopaedic Consultant (Bone Specialist) and Fracture Care Extended Scope Physiotherapist.

You have sustained a fracture to the mid-shaft of your clavicle (collar bone).

A fracture means the same as a broken bone and normally takes between 6-12 weeks to heal.

The image to the right is an example of mid-shaft clavicle fracture for your guidance.



Follow-up appointment

Approximately 85% of people with this type of fracture will fully heal and not require surgical intervention. There is a small group of patients that may require surgery. You will be given a follow-up appointment six weeks from the date of your injury. Evidence suggests this is the time we can be most accurate at diagnosing whether surgical intervention will be required or not (97% accuracy). Any patients, due to their lifestyle or occupational requirements who would like to be considered for early surgical intervention can be offered an earlier appointment at the discretion of the Orthopaedic Consultant.

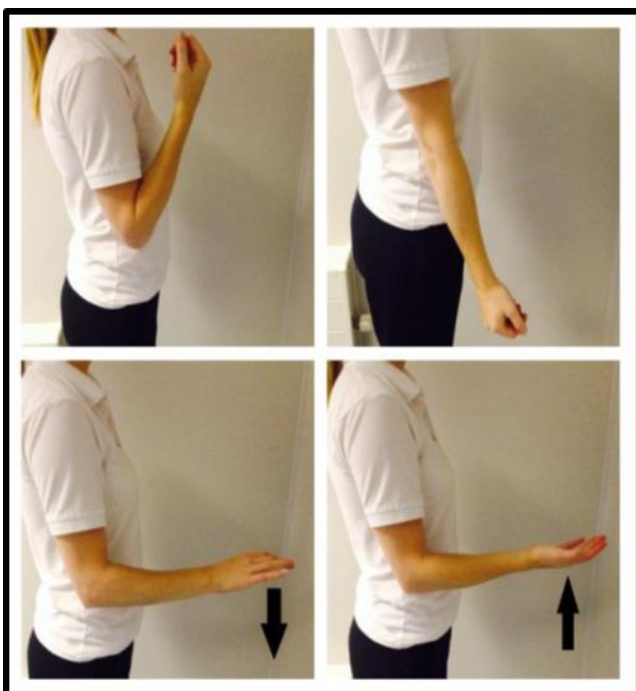
You may use the arm in the meantime as explained in this leaflet and indeed it is important to keep your shoulder moving to prevent stiffness but not to aggravate it. Please wear the sling provided for the first two weeks to allow the soft tissues to settle.

Take pain relief as prescribed. You may find it more comfortable to sleep propped up with pillows. If you are worried that you are unable to follow this rehabilitation plan, or have any questions, or if you are experiencing pain/symptoms other than at the site of the original injury or surrounding area then please contact the Virtual Fracture Care Team for advice. The contact details are at the top of this leaflet.

Management /rehabilitation plan - Please follow the plan outlined below.

Weeks since injury	Rehabilitation plan
0-3	Wear the sling during the day except for exercises and personal hygiene. It is your choice if you wish to wear it at night. Start the initial exercises. Do not lift your elbow above shoulder height as this may be painful.
3-6	Try not to use the sling and begin normal light activities with the arm and shoulder. Increase movement as shown in the Stage 2 exercises. You should avoid heavy lifting for the full 6 weeks.
6-12	The fracture should be largely united (healed) and you can resume normal activity but be governed by any pain you are experiencing. You should be able to carry out day to day activities although arduous tasks may cause discomfort. Start to lift your arm over-head.
12	If you are still experiencing significant pain and stiffness then please contact us for further consultation.

Initial exercises - do each exercise 4-5 times a day



If you have stiffness in your elbow or hand from wearing the sling, you may wish to perform these exercises first. However, once they become easy you can start with the posture and pendulum exercises.

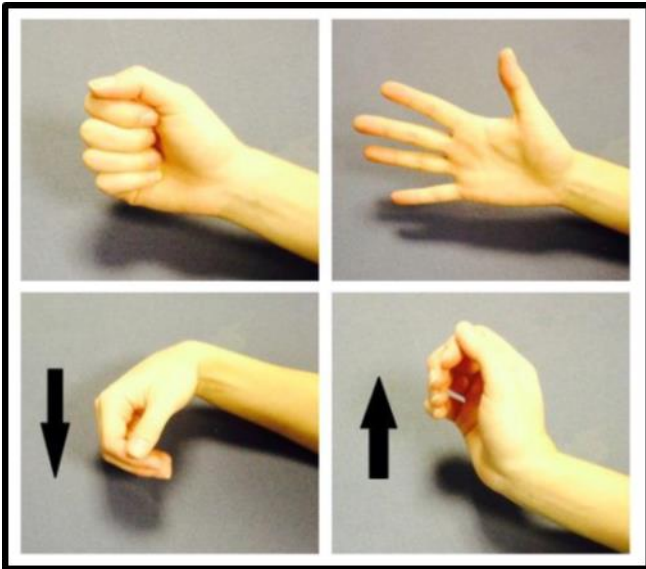
Elbow bend to straighten

Bend and straighten your elbow so you feel a mild to moderate stretch. You can use your other arm to assist if necessary. Do not push into pain.

Forearm rotations

Put your elbow at your side. Bend it to 90 degrees. Slowly rotate your palm up and down until you feel a mild to moderate stretch. You can use your other arm to assist if necessary. Do not push into pain.

Repeat 10-15 times provided there is no increase in symptoms.



Finger and wrist flexion and extension

Open and close your hand as shown 10-15 times. Then move your wrist up and down 10-15 times. After a few days, hold a soft ball/ball of socks. Squeeze the ball as hard as possible without pain.

Hold for 5 seconds and repeat 10 times.



Postural awareness

Bring your shoulders back and squeeze your shoulder blades together as shown in the picture. Do this with or without your sling on.

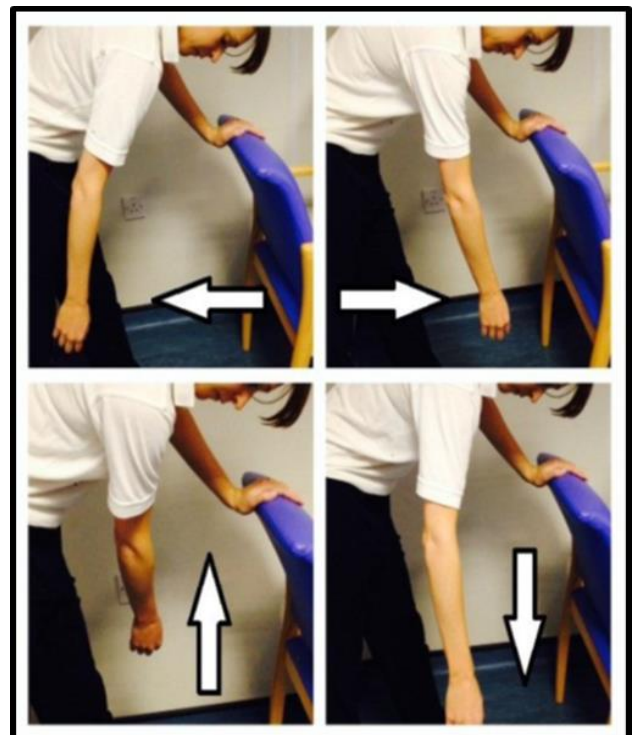
Hold the position for 20-30 seconds and repeat 5 times provided there is no increase in symptoms.

Shoulder pendulum exercises

Stand and lean forwards supporting yourself with the other hand. Try to relax your injured arm and let it hang down.

1. Swing your arm slowly and gently forwards and backwards.
2. Swing your arm slowly and gently side to side.
3. Swing your arm slowly and gently in circles clockwise.

Continue for approximately 1-2 minutes in total provided there is no increase in symptoms. Remember to try and relax your arm.



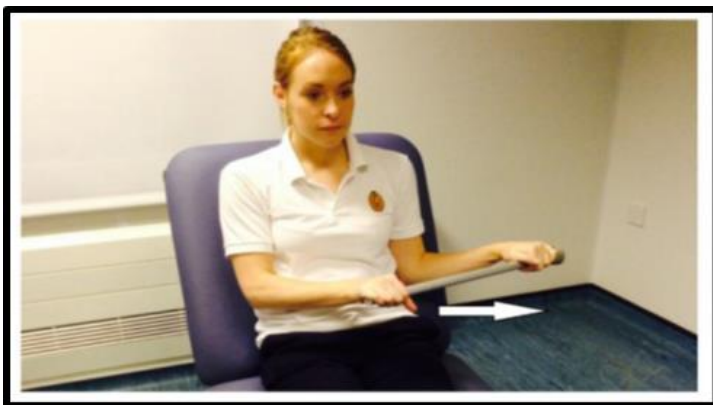
Start the following exercises 3 weeks after your injury.

Stage 2 exercises - do 4-5 times a day



Active assisted shoulder flexion

Use your other hand to lift your arm up in front of you as shown in the pictures. Repeat 10 times provided there is no increase in symptoms.



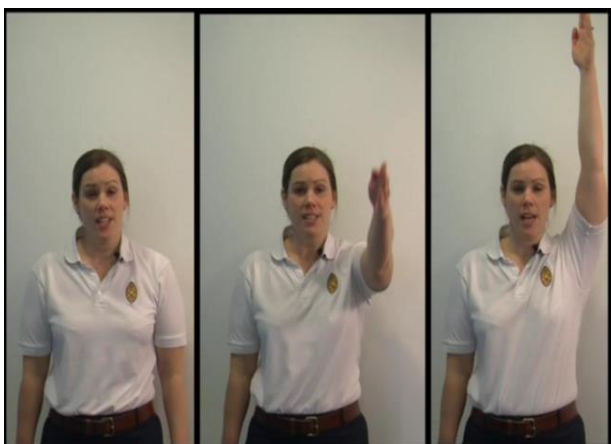
Active assisted external rotation

Keep the elbow of your injured arm tucked into your side and your elbow bent. Hold onto a stick/umbrella/golf club or similar. Use your unaffected arm to push your injured hand outwards. Remember to keep your elbow tucked in. Push until you feel a stretch. If you don't have a stick you could simply hold the injured arm at the wrist and guide it outwards.

Hold for 5 seconds then return to the starting position. Repeat 10 times provided there is no increase in symptoms.

Start the following exercises 6 weeks after your injury.

Stage 3 exercises - do 4-5 times a day



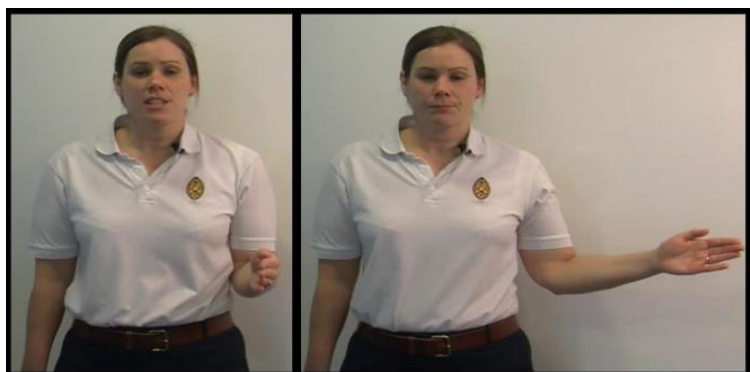
When you have regained full range of movement during the above exercises and without pain you can start to do the exercises without the support of your other hand; this is known as active range of movement. When you have regained your full range of movement without the support of the other arm you can start to build up your regular activities.

Active forward flexion:

With your thumb facing up, try to move your arm up, keeping it close beside your body.

Active abduction:

With your thumb facing up and outwards, try to move your arm in a big arc out to the side.



Active external rotation

With your elbow by your side, rotate your forearm outwards, keeping your elbow at about 90 degrees in flexion.

Repeat all 3 of these exercises 10 times each, 4-5 times a day. Only go as far as you can naturally, without doing any trick movements to try and get further. This will increase over time and should not be forced.

If you are having problems progressing with the exercises and have a follow-up consultation booked, please do let the clinician know so that they can review the exercises and refer you on to Physiotherapy if necessary.

Further information and advice can be obtained from:

NHS 111

☎ 111

NHS Choices online

www.nhs.uk

MTW NHS Trust is committed to making its patient information accessible in a range of languages and formats. If you need this leaflet in another language or format please ask one of your clinical care team or the Patient Advice and Liaison Service (PALS). We will do our best to arrange this.

Maidstone and Tunbridge Wells NHS Trust welcomes all forms of feedback from our service users. If the standard of service you have received from the Trust does not meet your expectations, we want to hear from you. Please speak with the ward manager or the nurse in charge in the first instance, or you can contact the **Patient Advice and Liaison Service (PALS)** on:

Telephone: ☎ 01622 224960 or ☎ 01892 632953

Email: mtw-tr.palsoffice@nhs.net

or visit their office at either Maidstone or Tunbridge Wells Hospital between 9.00am and 5.00pm, Monday to Friday.

You can be confident that your care will not be affected by highlighting any areas of concern or making a complaint. The Trust will retain a record of your contact, which is held separately to any medical records. If you are acting on behalf of a patient, we may need to obtain the patient's consent in order to protect patient confidentiality. More information on PALS or making a complaint can be found on the Trust's website: www.mtw.nhs.uk or pick up a leaflet from main reception.

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