

腕關節骨折之處理

簡介

大部份腕關節骨折的患者會感到手腕部位疼痛，甚至影響日常活動。醫生會因應骨折情況及個別病人需要，建議病人選取石膏固定或進行內固定手術。

手術前的準備

- ◆ 身體檢查：例如驗血、配血、X光檢查、心電圖、尿液分析等。
- ◆ 手術前應攝取充足的營養，多進食高蛋白及高卡路里食物以促進傷口癒合。
- ◆ 進行深呼吸及非患肢訓練運動以減少併發症的發生，有助康復。
- ◆ 手術前一晚要淋浴。
- ◆ 請依指定時間禁食。
- ◆ 須簽署手術同意書。
- ◆ 麻醉科醫生會決定何種麻醉形式進行這項手術。

手術後的護理

- ◆ 觀察病人維生指標，例如血壓、脈搏、體溫、呼吸狀況等。

- ◆ 一般而言，病人在完全甦醒之後，可以嘗試進食。
- ◆ 如傷口有疼痛，須小心輕放患肢，亦可服用止痛藥。
- ◆ 保持傷口清潔及乾爽。
- ◆ 手術後一至二日，待引流量減少便可除去引流。
- ◆ 約兩星期後便可拆線。
- ◆ 患肢需以手掛或枕頭墊高以避免腫脹。

併發症

- ◆ 傷口感染
- ◆ 出血
- ◆ 內固定器移位
- ◆ 血管、神經的損傷

康復計劃

- ◆ 石膏固定或內固定手術後，病人會在護理人員或物理治療師的指導下，開始進行患肢訓練。
- ◆ 在情況許可下，病人應多作患肢運動，以助減少腫脹及保持其靈活性。
- ◆ 如有需要，可用三角巾手掛承托及保護患肢。



三角巾手掛

患肢觀察

觀察患肢血液循環狀況，如有發現紅腫、蒼白、呈藍、冰冷、劇痛、麻痺、有滲液或異味等現象，請盡快求診。

石膏護理

避免損毀石膏，如有石膏軟化、變形、有裂痕、破碎、太鬆或太緊情況出現，請盡快求診。

飲食

鈣質、維他命C及D有助骨骼生長，促進癒合。如無抵觸，可多吃奶類、海產類及蔬果。

預防跌倒

教導病人及照顧者如何預防跌倒，避免跌倒及其帶來的傷害。

覆診

請依時覆診。

祝君早日康復！


如有任何查詢，請聯絡你的主診醫生

以上資料由瑪麗醫院矯形及創傷外科部提供。



瑪麗醫院
Queen Mary Hospital

腕關節骨折之處理 MANAGEMENT OF WRIST FRACTURE

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MANAGEMENT OF WRIST FRACTURE

Introduction

Majority of the patients suffering from wrist fracture will have pain in the wrist region, affecting daily activities. In view of varying degree of fracture severity and different individual needs, the doctor may advise patient to have plaster immobilization or surgery.

Pre-operative Preparations

- ◆ Pre-operative investigations, such as
 - Blood tests
 - Cross match
 - X-rays
 - Electrocardiogram
 - Urinalysis etc.
- ◆ Take nutritious diet, especially high in protein and carbohydrate if not contraindicated.
- ◆ Practice deep breathing and coughing exercises and non-affected limb exercises.
- ◆ Pre-operative bath.

- ◆ Stop eating/drinking at the prescribed time.
- ◆ A written consent is required.
- ◆ The mode of anesthesia will be decided by the anaesthesiologist.

Post-operative Care

- ◆ Patient's condition will be closely monitored, such as blood pressure, pulse, temperature, respiration status etc.
- ◆ In general, diet can be resumed once the patient is fully consent.
- ◆ Wound pain can be minimized by taking analgesic and gentle handling of the operated limb.
- ◆ Keep wound clean and dry.
- ◆ Drainage tube usually will be removed on post-operative day 1-2 when the drainage is minimal.
- ◆ Wound stitches will be removed around 2 weeks after the operation.
- ◆ The operated limb will be elevated with pillow, elevator or arm sling to prevent limb swelling.

Complications

- ◆ Wound infection
- ◆ Bleeding
- ◆ Implant displacement
- ◆ Neurovascular injury

Rehabilitation

- ◆ After plaster immobilization or surgery, patient will start mobilization exercises under nurse's or physiotherapist's supervision.
- ◆ If not contraindicated, patient should practice limb mobilization exercises as instructed to prevent limb swelling and complication.
- ◆ Arm sling will be applied to protect and support the affected limb if necessary.



Arm Sling

Observations

Observe the condition of the affected

limb. In case of swelling, skin redness, red or purplish, coldness, severe pain, numbness, discharge or foul smell from the plaster etc., seek medical advice promptly.

Care of the Plaster

Avoid damaging the plaster. If there is any change in shape, cracks, loosening or tightness, seek medical advice promptly.

Diet

Calcium, vitamins C & D help bone growth and promote healing. Take more dairy products, seafood, fruits and vegetables if not contraindicated.

Fall Prevention

Educate the patient and the carer how to prevent fall and the associated injury.

Follow Up

Follow up as scheduled.

Get Well Soon!

Should you have any queries, please consult your doctor-in-charge

Information provided by the Department of Orthopaedics and Traumatology, Queen Mary Hospital.