

SECTION: T-02

PROTOCOL TITLE: Orthopedic Injuries

REVISED: November 1, 2017

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**BLS SPECIFIC CARE: See General Trauma Care Protocol T-1**

*General Comments*

- Consider that injuries may be distracting from more subtle signs of spinal injury. Assess accordingly
- Follow Hospital Destination Protocol for major trauma
- Do not delay transport for splinting in unstable patients

*Long Bone Orthopedic Injuries*

- Splint, position and/or ice as needed
- Traction splints as indicated for femur fractures

*Suspected Pelvic Injuries*

- Consider Pelvic Immobilization

*Clavicle and Shoulder Injuries*

- Consider Sling and/or swath

**AEMT/O.M. Specific Care: See General Trauma Care Protocol T-1**

**ALS SPECIFIC CARE: See General Trauma Care Protocol T-1**

*Orthopedic Injuries*

- All angulated long bone fracture/dislocations with neurological or vascular compromise should be reduced as soon as possible
- Patellar dislocations may be reduced following patellar reduction guidelines at the paramedic's discretion
  - All patellar reductions should be encouraged to seek X-rays and physician evaluation

**PHYSICIAN PEARLS:**

**EARLY NOTIFICATION OF THE RECEIVING FACILITY IS  
ESSENTIAL IN SIGNIFICANT TRAUMA CASES**

Protocol

T-02

**ORTHOPEDIC INJURIES**