Partial/Green-stick fractures - Occur because bones in children especially <10 years are very flexible.

Longitudinal compression force leads to crumpling whereas an angulation force tends to bend the bone at one cortex & to buckle or break it at the other producing an incomplete fracture. They are not mobile due to the thick periosteum.

Open & Closed Fractures



Fig. 1.1 (Δ) Closed or simple fracture. There is no communication between the fractured bane and the body surface. (B) Open or compound fracture. There is a wound leading clown to the site of fracture. Organisms may gain access through the wound and infect the bone.

Open/Compound fractures

Open/Compound fractures can communicate with the outside in 3 ways;

- Trauma directly damaging skin & breaks bone outside-in injury
- ii) Bone breaks & pierces through skin inside-out injury
- iii) Injury to skin which becomes necrotic & sloughs off exposing bone

Classification

- A. Gustilo and Anderson Classification:
 - Type I fracture is a low-energy injury with a wound <I cm in length, often from an inside-out injury.
 - Type 2 fracture involves a wound >1 cm long and significantly more injury, caused by more energy absorption during the production of the fracture.
 - Type 3 fracture has extensive wounds >10 cm in length, significant fracture fragment
 comminution, and a great deal of soft tissue damage & periosteal stripping. It is usually a highenergy injury. This type of injury results typically from high-velocity gun shots, motorcycle
 accidents, or injuries with contamination from outdoor sites such as with tomado disasters or
 farming accidents.
 - Type 3A fractures do not require major reconstructive surgery to provide skin coverage.
 - Type 3B fractures, in contrast, usually require reconstructive procedures because of soft tissue defects that provide either poor coverage for bone or no coverage.
 - Type 3C injuries involve vascular compromise requiring surgical repair or reconstruction.
- B. Mangled Extremity Severity Score (MESS) Scoring:

Table 3-1. Factors in evaluation of the mangled extremity severity score (MESS) variables. 1

A. Skeletal and soft tissue injury	
Low energy (stab; simple fracture; "civilian" gunshot wound	1
Medium energy (open or multiple fractures, dislocation)	22
High energy (close-range shotgun or "military" gunshot wound, crush injury)	3
Very high energy (above plus gross contamination, soft tissue avulsion)	-45
B. Limb ischemia ²	
Pulse reduced or absent but perfusion normal	1
Pulseless: paresthesia, diminished capillary refilling	2
Cool, paratyzed, insensate, numb	3
C. Shock	
Systolic blood pressure almost more than 90 mm Hg	0
Hypotensive transiently	4
Persistent hypotension	2
D. Age	
<30 years	0
30-50 years	1
>50 years	2

¹Adapted and reproduced, with permission, from Johansen K et al: Objective criteria accurately predict amputation following lower extremity trauma. J Trauma 1990;30:369.
*Score doubled for ischemia more than 6 hours.

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Adams's Outline of Orthopaedics E-Book David L. Hamblen, Hamish Simpson, 2009-09-09 This extensively revised and redesigned edition of Adams s classic textbook on orthopaedics celebrates its 50th year in print Renown for its clear comprehensive and concise account of the subject the book will appeal to undergraduate postgraduate and trainee surgeons alike New edition of an internationally respected and successful textbook of orthopaedics Gives succinct practical guidance on examination of the limbs and spine especially useful for exam candidates Provides up to date surgical therapies as well as conservative treatment options for orthopaedic conditions Highly praised by reviewers for its clear and lucid text and for its logical classification of orthopaedic conditions A new author team includes a specialist contributor on imaging techniques The sections on clinical methods and diagnostic techniques have been expanded in particular those on new imaging modalities Includes recent advances in minimal access surgery Includes expanded coverage of hip surgery spinal surgery and reconstruction Includes a discussion of the role of genetics in the diagnosis of bone disorders A revised two colour page design now matches that of its sister title Outline of Fractures The extended artwork programme now includes more line drawings new radiographs MRI and CT scans Outline of Orthopaedics John Crawford Adams, David L. Hamblen, 1995 A D A M Animated Dissection of Anatomy for Medicine is a highly interactive multimedia software package of human anatomy Integrating detailed graphics with intuitive operation A D A M enhances the knowledge and communications capability of students and professionals worldwide Outlines in Orthopaedic Surgery Valentin Antoci, Adam E. M. Eltorai, 2019-10-25 Pocket size user friendly roadmap to learning the basic skills of orthopaedic surgery Surgery requires a combination of knowledge and skill acquired through years of direct observation mentorship and practice. The learning curve can be steep frustrating and intimidating for many medical students and junior residents Too often books and texts that attempt to translate the art of surgery are far too comprehensive for this audience and counterproductive to learning important basic skills to succeed Outlines in Orthopaedic Surgery by Valentin Antoci and Adam Eltorai is the orthopaedic volume in a series of textbooks that offer a simplified roadmap to surgery The text serves as starting point for learning orthopaedic surgery techniques with room for adding notes details and pearls collected during the journey This unique resource outlines key steps for common orthopaedic procedures laying a solid foundation of basic knowledge from which trainees can easily build and expand Thirty five chapters are systematically organized and formatted by subspecialty starting with an introduction followed by sections covering surgery of the hand shoulder and elbow joint arthroplasty sports orthopaedics spine surgery orthopaedic trauma foot and ankle and pediatrics Each chapter includes symptoms and signs surgical pathology diagnostic modalities differential diagnosis treatment options indications for surgical intervention step by step procedures pitfalls and prognosis Key Features Concise text and bullets provide quick procedural outlines essential for understanding procedural steps The generously illustrated text encompasses a full spectrum of musculoskeletal disorders related to degenerative

changes injuries and congenital conditions Treatment of a variety of fractures including both bones of the forearm Monteggia and olecranon lateral malleolus bimalleolar ankle and supracondylar humeral and intramedullary fixation of forearm fractures in pediatric patients This is an ideal easy to read resource for medical students and junior residents to utilize during orthopaedic surgery rotations and for quick consultation during the early years of practice It will also benefit allied health professionals who need a quick guide on core orthopaedic surgery procedures — *An Outline of Orthopaedic Practice* David Sutherland Muckle,1986 — National Library of Medicine Catalog National Library of Medicine (U.S.),1966

Illustrated Orthopedic Physical Assessment Ronald C. Evans, 2009-02-17 Logically organized with comprehensive coverage this newly revised third edition prepares you to choose the right orthopedic tests accurately assess any patient and arrive at a clear diagnosis Trusted for both its depth of coverage and its accessible accurate information it features gamuts clinical pearls and cross reference tables for quick and easy reference Now in brilliant full color with all new photos of every test it s even more visually appealing and illustrates common conditions and procedural tests more effectively than ever before This edition offers a fresh look at testing for orthopedic conditions with detailed text that explains the key moves of each test its alternate names and the appropriate reporting statement Extensive cross referencing ensures that you can easily find the right test for efficient and effective practice and protocol charts guide you through the examination process step by step Chapters are logically organized by region and tests within each chapter are arranged alphabetically so you can find the information you need in seconds Each test begins with a brief discussion of basic anatomy then moves into a description of the actual procedure and ends with next step directives Critical Thinking questions at the end of each chapter help you apply what you ve learned to clinical practice Orthopedic Gamuts provide summaries of key points in a concise list numerous gamuts within each chapter help you master material quickly and easily Clinical Pearls share the author s knowledge gained through years of clinical experience helping you avoid common misdiagnoses Cross reference tables offer at a glance guidance on which tests should be used to diagnose particular diseases for maximum accuracy and efficiency in practice Each chapter begins with an index of tests for easy reference and axioms that remind you of elemental information such as how painful certain maneuvers may be or the extent of some body parts range Contains a chapter on malingering non organically based complaints helping you investigate and determine the root cause of complaint whether due to injury for psychological reasons or an attempt to feign injury for various purposes such as for improper receipt of worker s compensation Companion DVD contains video footage of Dr Evans performing and explaining each assessment test in the book Full color photographs demonstrate how to perform 237 orthopedic tests At the Viewbox feature contains high quality radiographs that depict various pathologies as well as musculature and other anatomy that can t be shown photographically

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