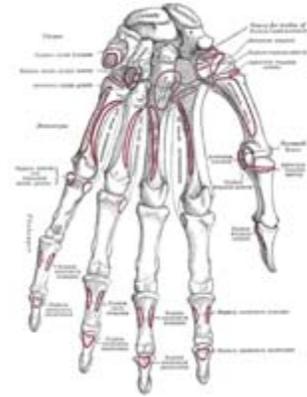


TRAUMATIC and ACUTE WRIST /HAND PAIN

Screening and Referral Tool (S&RT)



20th U.S. edition of Gray's Anatomy of the Human Body, originally published in 1918

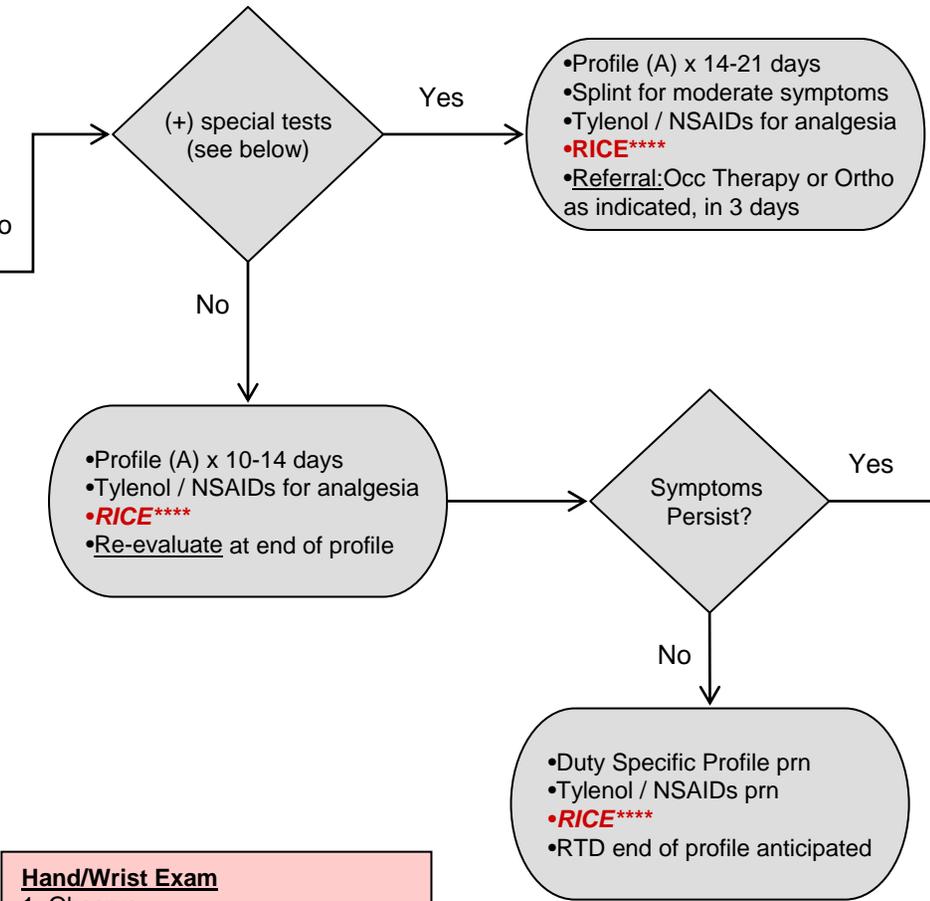
Soldier presents with traumatic or acute wrist/hand pain

*** Red Flags (Call Ortho/OT to discuss any positive red flag findings):**
 History of FOOSH with pain TTP at anatomical snuffbox or signs of dislocation
 Deformities of hand / wrist indication possible fractures
 NV compromise on exam
 Signs of symptoms of infection with or without constitutional symptoms
 Bites- human or animal
 Unwillingness to move due to pain
 Hand/wrist edema
 Inability to actively flex/extend an individual digit

A/P lateral of wrist/hand. If FOOSH or anatomical snuffbox tenderness, include scapoid series. Call Ortho/OT to discuss positive Red Flag findings

*****SPECIAL TESTS EXAM**

- (+) Finkelstein's
- (+) Allen's test
- (+) tinel's at wrist
- (+) Phalen's
- (+)mallet finger / ganglion/ trigger finger
- bone tenderness
- Blocking digit joints for individual finger flexor function



Hand/Wrist Exam

1. Observe:
 Symmetry & resting hand position
 Edema**
 Location of soft tissue injury
 Color/skin texture abnormalities may suggest digital nerve injury
 Vascular status- assess capillary refill, check radial and ulnar pulses
2. Sensory assessment
3. Motor and tendon screening:
 Pnt is able to individually raise each finger & flex/ext each finger joint
4. Bones and Joint assessment

******RICE**

- Relative rest as designated on profile
- Ice compress 2-3 times daily for 20 min.
- Compression by use of elastic bandage
- Elevation of affected joint above heart during periods of rest

Profiles

(A) No pushups, pull-ups, dips, sit-ups, no weapon carry, dangling, lifting: must wear splint at all times.

(B) No pushups, pull-ups, dips, no weapon carry, dangling, lifting: splint at all times (if prescribed)