



Toe Fracture or Dislocation

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You will not be routinely followed up.

This is a follow-up letter to your recent telephone consultation with the 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 or dislocation to one of your toes.

- **Pain & swelling:** The swelling is often worse at the end of the day and elevating it will help. Take pain killers as prescribed.
- **Walking:** You may walk on the foot as comfort allows. You may find it easier to walk on your heel to start with. The boot/shoe you may have been given is for your comfort only and is not needed to aid fracture healing.



If you are worried that you are unable to follow this rehabilitation plan, or have any questions, then please phone the Fracture Care Team for advice.

We do not routinely follow up patients with this type of injury.

If you are experiencing pain or symptoms, other than at the site of the original injury or surrounding area, please get in touch using the telephone details at the top of this letter.

If after six weeks you are still experiencing significant pain and swelling or struggling to wean out of the boot please do not hesitate to contact us for a further consultation.

Smoking cessation

Medical evidence suggests that smoking prolongs fracture healing time. In extreme cases it can stop healing altogether. It is important that you consider this information with relation to your recent injury. Stopping smoking during the healing phase of your fracture will help ensure optimal recovery from this injury.

For advice on smoking cessation and local support available, please refer to the following website: http://smokefree.nhs.uk or discuss this with your GP.

Please follow the Management plan below:

What to expect:

Weeks since injury	Rehabilitation plan
0-3	 If your toes have been buddy strapped you should remove this after 3 weeks. If supplied, wear the boot for comfort when walking. Take the boot off at night and when resting. Begin gentle exercises to get your movement back.
3-6	 If you were using them, try to stop using the boot and to walk without crutches. Start around your home at first. Continue with the exercises to regain flexibility in your foot and ankle.
6-12	 The fracture / dislocation (soft tissues) are healed. Begin to resume normal activity but be guided by any pain you experience. You should be able to carry out day to day activities. Arduous tasks and long walks may still cause some discomfort and swelling.
12	If you are still experiencing significant pain and swelling then please contact the Fracture Care Team for advice.

Advice for new injury:

Cold packs:

A cold pack (ice pack or frozen peas wrapped in a damp towel) can provide short term pain relief. Apply this to the sore area for up to 15 minutes, every few hours ensuring the ice is never in direct contact with the skin.

Rest and Elevation:

Try to rest the foot for the first 24-72 hours to allow the early stage of healing to begin. Raise your ankle above the level of your hips to reduce swelling. You can use pillows or a stool to keep your foot up.

Early movement and exercise:

Early movement of the ankle and foot is important to promote circulation and reduce the risk of developing a DVT (blood clot). Follow the exercises below without causing too much pain. This will ensure your ankle and foot do not become too stiff. These exercises will help the healing process.

Early weight bearing (putting weight through your injured foot) helps increase the speed of healing. Try to walk as normally as possible as this will help with your recovery.

Initial exercises to 3-4 times a day

Ankle and foot range of movement exercises. Repeat these 10 times each.

- 1. Point your foot up and down within a comfortable range of movement.
- 2. With your heels together, move your toes apart, as shown in the picture.
- 3. Make circles with your foot in one direction and then change direction.

