

the fracture become indistinct as the angles and bone overgrowth are smoothed out, giving the bone a straighter appearance.

Fractures heal in less time in children than in adults. The approximate healing times for a femoral shaft are as follows:

**Neonatal period:** 2 to 3 weeks

**Early childhood:** 4 weeks

**Later childhood:** 6 to 8 weeks

**Adolescence:** 8 to 12 weeks

## Diagnostic Evaluation

A history of the injury may be lacking in childhood injuries. Infants and toddlers are unable to communicate, and older children may not volunteer information (even under direct questioning) when the injury occurred during questionable activities. Whenever possible, it is helpful to obtain information from someone who witnessed the injury. In cases of nonaccidental trauma, providers may give false information to protect themselves or family members.

The child may exhibit the same manifestations seen in adults that may include swelling bruising, pain or tenderness, deformity, and diminished function ([Box 29-2](#)). However, often a fracture is remarkably stable because of intact periosteum. The child may even be able to use an affected arm or walk on a fractured leg. Because bones are highly vascular, a soft, pliable hematoma may be felt around the fracture site.

### Nursing Alert

A fracture should be strongly suspected in a small child who refuses to walk or crawl.

### Box 29-2

## Clinical Manifestations of a Fracture

Signs of injury: