

RICE THERAPY

(Rest, Ice, Compression, Elevation)

RICE is an acronym (a word formed from the first letters of a term) for the most important elements—rest, ice, compression, and elevation—in first aid for many injuries. This acronym appears repeatedly in medical literature in reference to athletic injuries. Use the word RICE to jog your memory when you are faced with such injuries as contusions, sprains, strains, dislocations, or uncomplicated fractures.

REST

Stop using the injured part and rest it as soon as you realize an injury has taken place. Continued exercise or other activity could cause further injury, delay healing, increase pain, and stimulate bleeding. Use crutches to avoid bearing weight on injuries of the foot, ankle, knee, or leg. Use splints for injuries of the hand, wrist, elbow, or arm. After medical treatment, the injured part may require immobilization with splints or a cast to keep the area at rest until it heals.

ICE

Ice helps stop bleeding from injured blood vessels and capillaries. Sudden cold causes small blood vessels to contract. This contraction of blood vessels decreases the amount of blood that can collect around the wound. The more blood that collects, the longer the healing time. Ice can be safely applied in several ways:

- For injuries to small areas, such as a finger, toe, foot, or wrist, immerse the injured area for 15 to 35 minutes in a bucket of ice water. Use ice cubes to keep the water cold, adding more as ice cubes dissolve.
- For injuries to larger areas, use ice packs. Avoid placing ice directly on the skin. Before applying the ice, place a towel, cloth, or one or two layers of an elasticized compression bandage on the skin to be iced. To make the ice pack, put ice chips or ice cubes in a plastic bag or wrap them in a thin towel. Place the ice pack over the cloth. The pack may sit directly on the injured part, or it may be wrapped in place.
- Ice the injured area for about 30 minutes (no matter what form of ice treatment you are using).
- Remove the ice to allow the skin to warm for 15 minutes.
- Reapply the ice.
- Repeat the icing and warming cycles for 3 hours. Follow the instructions below for compression and elevation. If pain and swelling persist after 3 hours call our office. You may need to change the icing schedule after the first 3 hours. Regular ice treatment is often discontinued after 24 to 48 hours. At that point, heat is sometimes more comfortable.

COMPRESSION

Compression decreases swelling by slowing bleeding and limiting the accumulation of blood and plasma near the injured site. Without compression, fluid from adjacent normal tissue seeps into the injured area. The more blood and fluid that accumulate around an injury, the slower the healing.

To apply compression safely to an injury:

- Use an elasticized bandage (Ace bandage) for compression, if possible. If you do not have one available, any kind of cloth will suffice for a short time.
- Wrap the injured part firmly, wrapping over the ice. Begin wrapping below the injury site and extend above the injury site.
- Be careful not to compress the area so tightly that the blood supply is impaired. Signs of deprivation of the blood supply include pain, numbness, cramping, and blue or dusky nails. Remove the compression bandage immediately if any of these symptoms appears. Leave the bandage off until all signs of impaired circulation disappear. Then rewrap the area—less tightly this time.

ELEVATION

Elevating the injured part above the level of the heart is another way to decrease swelling and pain at the injury site. Elevate the iced, compressed area in whatever way is most convenient. Prop an injured leg on a solid object or pillows. Elevate an injured arm by lying down and placing pillows under the arm or on the chest with the arm folded across. The whole upper part of the body may be elevated gently with pillows, with a reclining chair, or by raising the top of the bed on blocks.