



Queensland
Government

METRO NORTH HEALTH SERVICE DISTRICT

TPCH EMERGENCY DEPARTMENT

RODE ROAD, CHERMSIDE QLD 4032

DISCHARGE LETTER
CONFIDENTIAL

NO LMO

Phone
Fax

Dear Dr,

April 8, 2024

ANYA THEBAULT
22 BANYA ST
BULIMBA

Age 10 yrs
UR Num 752259

ANYA THEBAULT presented to the Emergency Department at THE PRINCE CHARLES HOSPITAL on the 8 APR 2024 at 13:27. The presenting problem was RIGHT WRIST PAIN - ICE SKATING 1/7 AGO. FALL.

The diagnosis was FRACTURE OF WRIST AND HAND

Presenting with
(R) Wrist pain.
Patient ID confirmed.
Patient and carer consented to assessment.

Hx
(R) wrist pain post FOOSH today while ice skating.
Pain about distal forearm/wrist that is increased with wrist movement.
Does not report P&N or numbness.
Did not hit head and no LOC.

PMx: Nil contributory and no other injuries or concerns.
Social: School student accompanied in the ED
Allergies: NKDA

Examination
Mild swelling about volar aspect (L) wrist/distal radius.
No obvious bruising or deformity and no open wounds.
Sensation normal and capillary refill is less than 2 sec.
Motor function test in hand "OK" sign, index DIP flexion, finger add/abd, and wrist ext all intact
Palpation
- pain distal radius.
- No pain on palpation of shoulder, clavicle, elbow, radial head, ulna, scaphoid, carpal, MC's, or fingers.
ROM
- Shoulder, elbow and fingers are all full ROM pain free.
- Wrist movement limited by pain to 1/2 range.

Impression
Distal forearm fracture or wrist sprain/strain.

X-rays (R) wrist - Dorsal cortex buckle fracture without displacement.
R/V with Dr J Scabot



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Management plan and treatment

Diagnosis and treatment plan discussed with patient and carer.


Patient and carer consented with treatment plan.

Wrist splint measured and fit to (R) arm according to 'buckle fracture management protocol'. Pain well controlled with splint. Splint use and care advice given.

Activity and elevation advice given. Sling applied.

Advised to maintain splint for 4 weeks then no sports or at risk activities for a further 4 weeks.

For review with any concerns.


MICHAEL FEENEY
EMERGENCY PHYSIOTHERAPY PRACTITIONER