

Upper Limb Fracture (broken Bone)

Information for parents with a newborn

Clavicle (Collar Bone) or Humerus (upper arm) Fractures:

These, although uncommon, can occur during the birthing process and can be painful when movement of the arm occurs until the fracture starts to heal.

Healing is quick in babies and the fracture should be healed within 1-3 weeks.

Your baby will not move their arm during the early stages of healing, which is a natural reaction to this injury. This is known as pseudoparalysis.

It is important that some advice is followed after babies are born, which aims to reduce discomfort and promote healing.

Caring for your baby- what can you do to help?

In the first 14 days following birth, try to follow this advice:

- Place the baby's affected arm inside their vest/baby grow
- Provide adequate support to the affected arm and avoid any stretching, pulling and pressure on the affected shoulder
- Pain Medication: The doctor will prescribe paracetamol for your baby and will advise you
 regarding the dose. If you have ongoing concerns that your baby still has significant pain/
 distress after 48 hours and is still requiring the maximum dose of paracetamol, please
 contact your GP for further advice
- **Sleeping**: Babies should be on their back to sleep with feet at the bottom of the cot, so if the arm is within their clothing this should offer enough support. Do not lay your baby on the affected side.
- **Bathing/skincare**: When bathing, keep the affected arm still and supported over baby's chest/tummy. Carefully wipe and clean under the arm with gentle careful movements if tolerated and carefully dry under the arm to prevent any sore skin
- **Dressing**: During dressing if the arm is sore on movement, place the **affected arm inside** the vest/babygrow with the lower arm across their tummy. If placing the arm into

clothing, put the <u>affected arm in first</u> and when taking clothes off, **leave it until last** to avoid any pushing, twisting and turning of the shoulder

- **Feeding**: Find the positions that work best for you and your baby but keep baby's affected arm supported with the forearm over the chest/tummy. Do not let the arm drop and hang without support. Some parents have found wrapping the arm in a thin muslin cloth during feeding helps to ensure the arm is supported
- Carrying/handling: Support the affected arm by keeping your baby's arm close to their body (lower arm on tummy) when picking up and carrying your baby to avoid the arm hanging down. Do not pull on your baby's arm or lift them under the armpits



• This advice applies for the first 2-3 weeks or until your baby starts moving their arm themselves without any signs of pain.

Once the fracture has healed and you see some active movement in baby's arm, encourage sensory awareness and gentle guided movement of the affected arm:

- Let baby's hand grasp your finger and gently guide their hand to their mouth let them suck their hand
- Touch, stroke and kiss baby's arms and hand
- Gently move baby's shoulder by taking it away from their body when washing and dressing them and place the arm back into the sleeve of their vest and babygrow to allow it to move normally again.

If your baby is not moving their arm at the shoulder by 3 weeks old they should be referred by either your GP or the Neonatal Clinic directly to the Fracture Clinic at the RHCYP.

If you have any significant concerns, please phone the RHCYP hospital's main reception on 0131 536 0000 and ask for the Orthopaedic Registrar at the RHCYP.