If you have any other problems, for example, the pain does not go away after taking simple pain medicines, please come back to the emergency department.

To ensure your child’s injury is being treated correctly, their x-rays are looked at by specialist x-ray doctors. If we have any concerns we will contact you directly, and may ask you to come back to hospital.

**How to find us**
For information on directions, public transport and parking visit [www.kch.nhs.uk](http://www.kch.nhs.uk) and look at ‘Getting to King’s’.

**Sharing your information**
We have teamed up with Guy’s and St Thomas’ Hospitals in a partnership known as King’s Health Partners Academic Health Sciences Centre. We are working together to give our patients the best possible care, so you might find we invite you for appointments at Guy’s or St Thomas’.
To make sure everyone you meet always has the most up-to-date information about your health, we may share information about you between the hospitals.

**Care provided by students**
We provide clinical training where our students get practical experience by treating patients. Please tell your doctor or nurse if you do not want students to be involved in your care. Your treatment will not be affected by your decision.

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**PALS**
The Patient Advice and Liaison Service (PALS) is a service that offers support, information and assistance to patients, relatives and visitors. They can also provide help and advice if you have a concern or complaint that staff have not been able to resolve for you. They can also pass on praise or thanks to our teams. The PALS office is in the main hospital foyer at PRUH and they would be happy to advise you.

PALS at Princess Royal University Hospital, Farnborough Common, Orpington, Kent BR6 8ND
Tel: 01689 863252
Email: kch-tr.palspruh@nhs.net

**If you would like the information in this leaflet in a different language or format, please contact our Communications and Interpreting telephone line on 020 3299 4826 or email kch-tr.accessibility@nhs.net.**

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**Minor injuries of the toes**

Information for patients and parents/carers – Princess Royal University Hospital

This leaflet explains what to do if you/your child has been diagnosed with a minor injury of the toes. It explains the symptoms, what you can do and what you can expect.
Introduction
Your child has been seen and assessed by one of the doctors or nurse practitioners who believes it is safe for you to take your child home. This leaflet has been written by the doctors and nurses working in the children's emergency department to act as a guide and to remind you of some of the things you need to know in order to look after your child in the future. We hope this will be helpful to you. Please read it carefully.

What is a toe fracture?
Your child has sustained a fracture of one of their toes. These types of fractures normally heal well without any problems and therefore routine follow up is not necessary.

Hearing us say your child may have a ‘fracture’ sounds serious. The good news is, if there is a little fracture, it is a minor injury - the bones are stable and held in the right place, no procedures are needed and your child will make a full recovery.

What to expect
- This type of fracture normally heals well by itself and needs no further management however you may be offered a follow up appointment if it is felt needed.
- Symptoms such as pain/ discomfort, stiffness and swelling may continue for several weeks after the injury. You can use paracetamol or ibuprofen to help your child feel more comfortable. Please always give medication as indicated on the label.

Treatment
- Strapping with tape will be applied to the toe, you should try to keep this try however can be changed if wet
- You should continue to strap the toe for 1 week but this can be extended up to 3 weeks if pain persists
- During this time you may find if painful to walk. Over the counter pain relief such as paracetamol and ibuprofen can be taken to help with this. Please follow the instructions on the packet
- Elevate the foot when resting (including at night) to help reduce swelling
- An ice pack can be applied to the affected area to help with pain. The ice pack should be wrapped in a towel and not be placed directly on to skin. Apply for 10 – 20 minutes at a time.
- Heat and massage should be avoided for the first 72 hours after injury, this will encourage further swelling and bruising
- Sports activities should be avoided during the first 3 weeks post injury. You should gradually return to sport as your pain tolerates

Virtual Fracture Clinic
Your child's injury will heal up all on its own. To ensure safety, we ask our team in the ‘Virtual Fracture Clinic’ to review all cases nonetheless. Details of your child's injury and the x-ray images will be reviewed by our orthopaedic (bone specialist) and physiotherapy teams. Normally they will not need to call you. You can simply continue to follow the Emergency Department (ED) instructions and advice. If your child's injury does not improve as outlined by the ED instructions, please contact the virtual fracture clinic on the details below.

Occasionally, the team may need to contact you by phone to discuss your child's injury further. The doctors in ED will let you know if you should expect a follow up phone call. This call will be a withheld number and be between 9am – 4pm, Monday – Friday.

PLEASE ENSURE WE HAVE YOUR CORRECT CONTACT DETAILS BEFORE YOU GO HOME.

If you have been told to expect a call and have not been contacted within three working days of your child’s visit, please phone 01689 865136 between 9am – 4pm, Monday - Friday.
Email: kch-tr.pruhfracturecareteam@nhs.net

Return to sport
- Your child can return to full activity when the toe is not painful and they can walk without pain. Sports activities should be avoided during the first 3 weeks post injury. You should gradually return to sport as your pain tolerates

Before returning to competitive sport, you may want to see a doctor or physiotherapist who knows about athletic and sport-related injuries. Most children are doing all their normal sports and play by three months after the injury.

Problems
If your child has sudden new pain, swelling or tingling in their injured area, that would be unusual. If this happens, please come back to the children’s emergency department at any time.