

# Thomas Splint Traction

Information for parents and/or caregivers

Welcome to the Southern Adelaide Local Health network. This information sheet aims to answer any questions you may have about your child having a Thomas Splint Traction.

## What is a Thomas Splint?

Thomas Splint traction is a treatment for children who have sustained a fractured femur in their leg. A Thomas Splint controls the position of the fractured leg, helps it to heal and controls pain and muscle spasm that can occur.

## Thomas Splint application

The Thomas Splint will be applied in the Emergency Department or in the Theatre area after your child has been given appropriate pain relief.

A bandage will be applied followed by a ring which surrounds the leg. Weights are applied via pulleys and ropes which elevate the leg slightly off the bed. A second bandage will be applied covering most of the leg to secure it.

The amount of time a child is placed in Thomas Splint traction depends on the type of fracture and the age of the patient but it is often up to three weeks.



## Care of your child while in Thomas Splint traction

You are encouraged to participate in caring for your child during their stay.

## Pain

Once the traction has been applied your child is usually more comfortable. Nursing staff will give your child regular pain relief in the first few days then assess and give as required. Please notify staff if you feel your child is in pain.

Your child may experience muscle spasms in the broken leg despite having traction on. A muscle spasm looks like a twitching or jumping of the leg. Spasms can occur when the bones begin to realign and the muscles are trying to hold the broken bone in place. If your child experiences this, please tell your nurse so they can give your child medication to help ease the spasm.

## Daily wash and re-bandage

Your child will have a wash, a change of sheets and a back wash before they go to sleep each day. As your child becomes more comfortable they may be able to assist with moving in the bed by using the trapeze over their heads to lift up. The nurse will guide and assist you if you wish to wash your child.

Nursing staff will remove the outer bandage of the traction daily to check the skin underneath. The bandage will then be put on again.

## Toileting

Children in Thomas Splint traction will need to use a bed pan / bottle to wee. Bedwetting is common in younger children in traction. Some children fear weeing in a bed pan / bottle and are more at risk of developing urinary tract infections. If your child is in nappies, your nurse will assist you in changing them.

Encourage plenty of fluids and a high fibre diet to avoid constipation. Your child will be given daily medication to prevent constipation also.

## Safety

Despite the child being held in traction, **bed sides must be up when unsupervised** to ensure patient safety.

## Your child's development

Our activity co-ordinator or a volunteer will assist in providing suitable toys and stimulation to encourage your child's mental, physical and social development.

Please feel free to bring in your child's favourite toys.

The activity co-ordinator and volunteers are available Monday to Friday to help keep your child active and stimulated while in the traction.

## Neurovascular assessment

Nursing staff will regularly check your child's leg and foot to ensure the traction and bandages are not too tight. Nursing staff will also regularly perform a ring toilet where talcum powder is placed under the ring using a piece of ribbon gauze or their finger to help prevent friction / rubbing and pressure sores.

## X-ray

Your child will have an x-ray at one week, two weeks and six weeks to check on the new bone (callus) which is forming around the fracture site. These x-rays will determine the amount of time your child needs to stay in traction.

## Completion of traction

Once the Orthopaedic team are happy that the bone is straight and there is enough new bone formed around the fracture children will be taken out of the traction and put into an Orthopaedic cast such as a Hip Spica for the remainder of the healing process.

A Hip Spica is a body cast which restricts movement of the legs. Nursing staff and the physiotherapists will educate you on caring for your child with this plaster.

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## For more information

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