




Ankle and foot injuries

Queensland Ambulance Service

Exclusion from transport to General Practice

-  Obvious deformity of ankle and/or foot
-  Compound fracture (skin broken over deformity)
-  Neurovascular compromise (no sensation or warmth in foot).

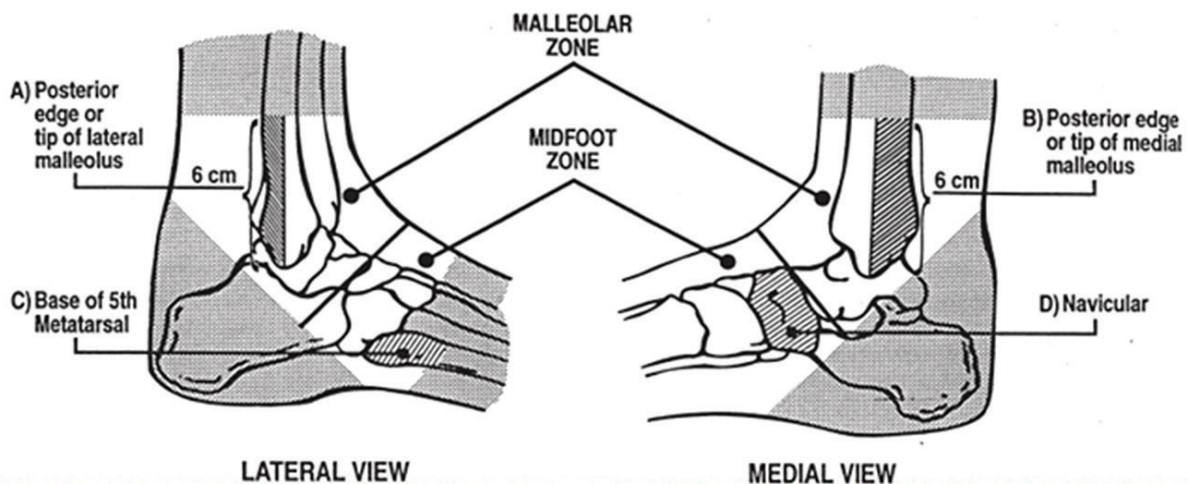
Management

- Analgesia as required
- Ice
- Vacuum splint or bandage support.

General Practice

Assessment

Ottawa ankle rules for ankle injury radiography



Stiell IG, McKnight RD, Greenberg GH, McDowell I, Nair RC, Wells GA, Johns C, Worthington JR. Implementation of the Ottawa ankle rules. JAMA. 1994 Mar 16;271(11):827-32.

Ottawa ankle rules for ankle injury radiography

An **ankle** X-ray series is only required if there is any pain in the malleolar zone and any of these findings:

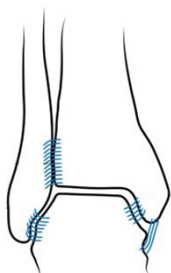
1. Bone tenderness at A or;
2. Bone tenderness at B or;
3. Inability to bear weight both immediately and in the Emergency Department

A **foot** X-ray series is only required if there is any pain in the midfoot zone and any of these findings:

1. Bone tenderness at C or;
2. Bone tenderness at D or;
3. Inability to bear weight both immediately and in the Emergency Department.

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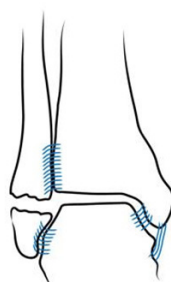
Management



Normal

Ankle sprains and flake fractures (Fibula, Navicular, Talus):

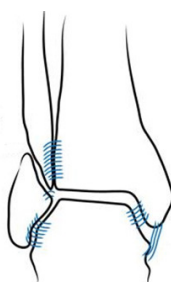
- Consider appropriate analgesia +/- NSAID
- Soft immobilization of ankle or moonboot (depending on pain and ability to mobilize)
- Crutches, if required
- Consider referral to Physiotherapist
- Provide supplied information handout to the patient



Weber A

Ankle fracture (Weber A):

- Consider appropriate analgesia +/- NSAID
- Below knee back slab with ankle at 90° (in neutral)
- Crutches, if required
- Refer to community fracture clinic, unless associated medial malleolus fracture, then refer SCHHS fracture clinic



Weber B

Ankle fracture (Weber B):

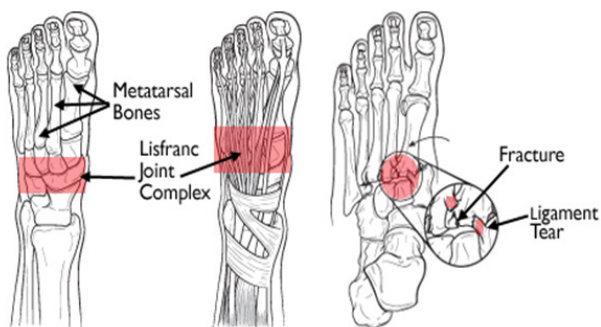
- Consider appropriate analgesia +/- NSAID
- Below knee back slab with ankle at 90° (in neutral)
- Control x-ray (3 views)
- Crutches, if required
- Call Orthopaedic Registrar (5470 6600) if concerned about displacement
- Refer to SCHHS Fracture Clinic



Weber C

Ankle fracture (Weber C):

- Consider appropriate analgesia +/- NSAID
- Below knee back slab with ankle at 90° (in neutral)
- Control x-ray (3 views)
- Crutches, if required
- Call Orthopaedic Registrar (5470 6600) if concerned about displacement
- Refer to SCHHS Fracture Clinic



Lisfranc and syndesmosis injuries:

- Consider appropriate analgesia +/- NSAID
- Below knee back slab with ankle at 90° (in neutral)
- Crutches, if required
- **Refer to SCHHS Fracture Clinic.**

Hind and mid foot fractures:

- Displaced:
 - Call Orthopaedic Registrar (5470 6600)
- Non-Displaced:
 - Below knee back slab with ankle at 90° (in neutral)
 - **Refer to Community Fracture Clinic**
- Calcaneal:
 - Soft immobilization
 - Non weight bearing on crutches

Escalation triggers

Refer to the Emergency Department

If the patient has any of the following, please call the Orthopaedic Registrar (5470 6600) prior to referral to the Emergency Department:

- Displaced fractures
- Fracture-dislocations
- Compartment syndrome
- Neurovascular deterioration
- Worsening pain requiring intramuscular analgesics
- Any other serious clinical concerns not already listed.

Disclaimer:

This clinical pathway is a suggested guideline only, based on current evidence, and does not replace use of clinical judgement.



Governance for Safety and Quality in Health Service Organisations - Standard 1

Involves setting direction, making policy and strategy decisions, overseeing and monitoring organisational performance and ensuring overall accountability for a service.



Service Delivery - Standard 11

Patients and the community have access to safe, high quality healthcare services that are appropriate, effective and meet their needs.



Provision of Care - Standard 12

The intention of this standard is to ensure high quality care is delivered to consumers/patients throughout the care continuum.



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