

Ankle and Foot Injury

Office Hours Telephone Triage Protocols | Adult | 2016



DEFINITION

- Injuries to a bone, muscle, joint, or ligament of the ankle and foot
- Associated skin and soft tissue injuries are also included

TRIAGE ASSESSMENT QUESTIONS

Call EMS 911 Now

Major bleeding (actively dripping or spurting) that can't be stopped

FIRST AID: Apply direct pressure to the entire wound with a clean cloth.

Amputation or bone sticking through the skin

FIRST AID: Apply direct pressure to the entire wound with a clean cloth.

Looks like a dislocated joint (crooked or deformed)

R/O: dislocation, fracture

Sounds like a life-threatening emergency to the triager

See More Appropriate Protocol

Wound looks infected

Go to Protocol: Wound Infection (Adult)

Caused by an animal bite

Go to Protocol: Animal Bite (Adult)

Puncture wound of foot

Go to Protocol: Puncture Wound (Adult)

Toe injury is the main symptom

Go to Protocol: Toe Injury (Adult)

Go to ED Now

Bullet, stabbed by knife or other serious penetrating wound

FIRST AID: If penetrating object still in place, don't remove it.

Go to ED Now (or to Office with PCP Approval)

Can't stand (bear weight) or walk (e.g., 4 steps)

R/O: fracture, severe sprain

Skin is split open or gaping (length > 1/2 inch or 12 mm)

Reason: may need laceration repair (e.g., sutures)

Bleeding won't stop after 10 minutes of direct pressure (using correct technique)

Dirt in the wound and not removed after 15 minutes of scrubbing

Reason: needs irrigation or debridement

Numbness (new loss of sensation) of toe(s)

Looks infected (e.g., spreading redness, pus, red streak)

R/O: cellulitis, lymphangitis

Sounds like a serious injury to the triager

See Today in Office

SEVERE pain (e.g., excruciating)

R/O: fracture, severe sprain

A 'snap' or 'pop' was heard at the time of injury

R/O: ligament tear

Large swelling or bruise and size > palm of person's hand

R/O: fracture, large contusion

Patient wants to be seen

See Today or Tomorrow in Office

Diabetes

Reason: diabetic neuropathy reduces pain of fracture and wound infection

High-risk adult (e.g., age > 60, osteoporosis, chronic steroid use)

Reason: greater risk of fracture in patients with osteoporosis

Suspicious history for the injury

R/O: domestic violence or elder abuse

Wound and no tetanus booster in > 5 years (Or greater than 10 years for clean cuts)

Reason: may need a tetanus booster shot (vaccine).

See Within 3 Days in Office

Injury and pain has not improved after 3 days

Injury is still painful or swollen after 2 weeks

Home Care

Minor ankle or foot injury

R/O: bruise, strain or sprain

Home Care Advice

Treatment of a Minor Bruise, Sprain, or Strain

1.] Reassurance - Direct Blow (Contusion, Bruise):

- A direct blow to your ankle or foot can cause a contusion. Contusion is the medical term for bruise.
- Symptoms are mild pain, swelling, and/or bruising.
- *Here is some care advice that should help.*

2.] **Reassurance - Bending or Twisting Injury (Strain, Sprain):**

- Strain and sprain are the medical terms used to describe over-stretching of the muscles and ligaments of the ankle or foot. A twisting or bending injury can cause a strain or sprain.
- The main symptom is pain that is worse with movement and walking. Swelling can occur. Rarely there may be slight bruising.
- *Here is some care advice that should help.*

3.] **Apply a Cold Pack:**

- Apply a cold pack or an ice bag (wrapped in a moist towel) to the area for 20 minutes. Repeat in 1 hour, then every 4 hours while awake.
- Continue this for the first 48 hours after an injury.
- This will help decrease pain and swelling.

4.] **Apply Heat to the Area:**

- Beginning 48 hours after an injury, apply a warm washcloth or heating pad for 10 minutes three times a day.
- This will help increase blood flow and improve healing.

5.] **Wrap with an Elastic Bandage:**

- Wrap the injured part with a snug, elastic bandage for 48 hours.
- The pressure from the bandage can make it feel better and help prevent swelling.
- If you start to get numbness or tingling of your foot or toes the bandage may be too tight. Loosen the bandage wrap.

6.] **Elevate the Ankle and Foot:**

- Lay down and put your ankle and foot on a pillow. This puts (elevates) the ankle and foot above the heart.
- Do this for 15-20 minutes, 2-3 times a day, for the first two days.
- This can also help decrease swelling, bruising, and pain.

7.] **Rest vs. Movement:**

- Movement is generally more healing in the long term than rest.
- Continue normal activities (like walking) as much as your pain permits.
- Avoid running and active sports for 1-2 weeks or until the pain and swelling are gone.
- Complete rest should only be used for the first day or two after an injury. If it really hurts too much to walk, you will need to see the doctor.

8.] **Expected Course:**

- Pain, swelling, and bruising usually start to get better 2 to 3 days after an injury.
- Swelling most often is gone after 1 week.
- Bruises fade away slowly over 1-2 weeks.
- It may take 2 weeks for pain and tenderness of the injured area to go away.

9.] **Call Back If:**

- Pain becomes severe
- Pain does not improve after 3 days
- Pain or swelling lasts more than 2 weeks
- You become worse

Treatment of a Small Cut or Scrape

1.] **Reassurance - Superficial Laceration (Cut or Scratch) or Abrasion (Scrape):**

- This sounds like a small cut or scrape that we can treat at home.
- *Here is some care advice that should help.*

2.] **Bleeding:** Apply direct pressure for 10 minutes with a sterile gauze to stop any bleeding.

3.] **Cleaning the Wound:**

- Wash the wound with soap and water for 5 minutes.
- For any dirt, scrub gently with a wash cloth.
- For any bleeding, apply direct pressure with a sterile gauze or clean cloth for 10 minutes.

4.] **Antibiotic Ointment:**

- Apply an **Antibiotic Ointment** (e.g., OTC Bacitracin), covered by a Band-Aid or dressing. Change daily or if it becomes wet.
- *Option:* A **TEFLA** dressing won't stick to the wound when it is removed.
- *Option:* Another option is to use a **Liquid Skin Bandage** that only needs to be applied once. Don't use antibiotic ointment if you use a liquid skin bandage.

5.] **Liquid Skin Bandage:**

- You can use a liquid skin bandage instead of antibiotic ointment and a dressing or a Band-Aid.
- **Benefits:** Liquid skin bandage has several benefits when compared to a regular bandage (e.g., a dressing or a Band-Aid). You only need to put a liquid bandage on once to minor cuts and scrapes. It helps stop minor bleeding. It seals the wound and may promote faster healing and lower infection rates. However, it also costs more.
- **How To Use It:** First clean and dry the wound. You put on the liquid as spray or with a swab. It dries in less than a minute and usually lasts a week. You can get it wet.
- **Examples:** Liquid skin bandage is available over-the-counter. Examples are Band-Aid Liquid Bandage, New Skin, Curad Spray Bandage, and 3M No Sting Liquid Bandage Spray.

6.] **Call Back If:**

- Looks infected (pus, redness, increasing tenderness)
- Doesn't heal within 10 days
- You become worse

Over-The-Counter Pain Medicines

1.] **Pain Medicines:**

- For pain relief, you can take either acetaminophen, ibuprofen, or naproxen.
- They are over-the-counter (OTC) pain drugs. You can buy them at the drugstore.

Acetaminophen (e.g., Tylenol):

- *Regular Strength Tylenol:* Take 650 mg (two 325 mg pills) by mouth every 4-6 hours as needed. Each Regular Strength Tylenol pill has 325 mg of acetaminophen.
- *Extra Strength Tylenol:* Take 1,000 mg (two 500 mg pills) every 8 hours as needed. Each Extra Strength Tylenol pill has 500 mg of acetaminophen.
- The most you should take each day is 3,000 mg (10 Regular Strength or 6 Extra Strength pills a day).

Ibuprofen (e.g., Motrin, Advil):

- Take 400 mg (two 200 mg pills) by mouth every 6 hours.
- Another choice is to take 600 mg (three 200 mg pills) by mouth every 8 hours.
- The most you should take each day is 1,200 mg (six 200 mg pills), unless your doctor has told you to take more.

Naproxen (e.g., Aleve):

- Take 220 mg (one 220 mg pill) by mouth every 8 hours as needed. You may take 440 mg (two 220 mg pills) for your first dose.
- The most you should take each day is 660 mg (three 220 mg pills a day), unless your doctor has told you to take more.

2.] Pain Medicines - Extra Notes:

- Use the lowest amount of medicine that makes your pain better.
- Acetaminophen is thought to be safer than ibuprofen or naproxen in people over 65 years old. Acetaminophen is in many OTC and prescription medicines. It might be in more than one medicine that you are taking. You need to be careful and not take an overdose. An acetaminophen overdose can hurt the liver.
- McNeil, the company that makes Tylenol, has different dosage instructions for Tylenol in Canada and the United States. In Canada, the maximum recommended dose per day is 4,000 mg or twelve Regular-Strength (325 mg) pills. In the United States, McNeil recommends a maximum dose of ten Regular-Strength (325 mg) pills.
- **Caution:** Do not take acetaminophen if you have liver disease.
- **Caution:** Do not take ibuprofen or naproxen if you have stomach problems, kidney disease, are pregnant, or have been told by your doctor to avoid this type of anti-inflammatory drug. Do not take ibuprofen or naproxen for more than 7 days without consulting your doctor.
- *Before taking any medicine, read all the instructions on the package.*

3.] Call Back If:

- You have more questions
- You become worse

FIRST AID

FIRST AID Advice for Bleeding: Apply direct pressure to the entire wound with a clean cloth.

FIRST AID Advice for Penetrating Object: If penetrating object still in place, don't remove it.

FIRST AID Advice for Shock: Lie down with feet elevated.

FIRST AID Advice for a Sprain or Twisting Injury of Ankle or Foot:

- Apply a cold pack or an ice bag (wrapped in a moist towel) to the area for 20 minutes.
- Wrap area with an elastic bandage.

FIRST AID Advice for Suspected Fracture or Dislocation of Ankle or Foot:

- Do not remove the shoe.
- Immobilize the ankle and foot by wrapping them with a soft splint (e.g., a pillow, a rolled-up blanket, a towel).
- Use tape to keep this splint in place.

Transport of an Amputated Body Part:

- Briefly rinse amputated part with water (to remove any dirt).
- Place amputated part in plastic bag (to protect and keep clean).
- Place plastic bag containing part in a container of ice (to keep cool and preserve tissue).

BACKGROUND INFORMATION

Types of Foot and Ankle Injuries

- **Achilles tendon rupture:** There is pain in the Achilles tendon (area above heel and behind ankle). There is weakness or inability to extend the foot (e.g., can't stand on tiptoes).
- **Contusion:** A direct blow or crushing injury results in bruising of the skin, muscle, and underlying bone.

- Cuts, abrasions
- Dislocations (bone out of joint)
- Fractures (broken bones)
- Sprains: Stretches and tears of ligaments
- Strains: Stretches and tears of muscles (e.g., pulled muscle)

What Cuts Need to be Sutured?

- Any cut that is split open or gaping probably needs sutures (or staples or skin glue).
- Cuts longer than 1/2 inch (1 cm) usually need sutures.
- Any open wound that may need sutures should be evaluated by a physician regardless of the time that has passed since the initial injury.

When Does an Adult Need a Tetanus Booster (Tetanus Shot)?

- **Clean Cuts and Scrapes - Tetanus Booster Needed Every 10 Years:** Patients with **clean minor** wounds AND who have previously had 3 or more tetanus shots (full series) need a booster every 10 years. Examples of minor wounds include a superficial abrasion or a shallow cut from a clean knife blade. Obtain booster within 72 hours.
- **Dirty Wounds - Tetanus Booster Needed Every 5 Years:** Patients with **dirty** wounds need a booster if it has been more than 5 years since the last booster. Examples of dirty wounds include those contaminated with soil, feces, saliva and more serious wounds from deep punctures, crushing, and burns. Obtain booster within 72 hours.

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