

**MEHLVILLE FIRE PROTECTION DISTRICT
EMERGENCY MEDICAL SERVICES
GUIDELINES FOR PREHOSPITAL EMERGENCY CARE**

**SUBJECT: 800.11
TRAUMA:
SPLINTING**

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Immobilizing a Long Bone:

1. Direct application of manual stabilization.
2. Assess distal motor ability, sensory response, and circulation.
3. Measure splint. It should extend several inches beyond joints and below injury.
4. Apply splint and immobilize joints above and below injury.
5. Secure entire extremity in position of function as much as possible.
6. Reassess the motor, sensory, and circulation.

Immobilizing a Joint:

1. Direct application of manual stabilization.
2. Assess distal motor ability, sensory response, and circulation.
3. Select proper splint material. Immobilize site of injury and bones above and below.
4. Reassess the motor, sensory, and circulation.

Splinting a Femur (Traction Splint):

1. If femur fracture is suspected, apply direct manual stabilization of injured leg.
2. Assess distal motor ability, sensory response, and circulation.
3. Apply manual traction to leg.
4. Adjust and position the traction splint at injured leg.
5. Apply proximal securing device (i.e. ischial strap).
6. Apply distal securing device (i.e. ankle hitch).
7. Apply mechanical traction.
8. Position and secure the support straps.
9. Reassess the motor, sensory, and circulation.
10. Secure patient's torso and traction splint to long board for transport.