

# Fitting Slings in ED

**SCOPE (Area):** Emergency Department

**SCOPE (Staff):** Physiotherapists, Medical and Nursing

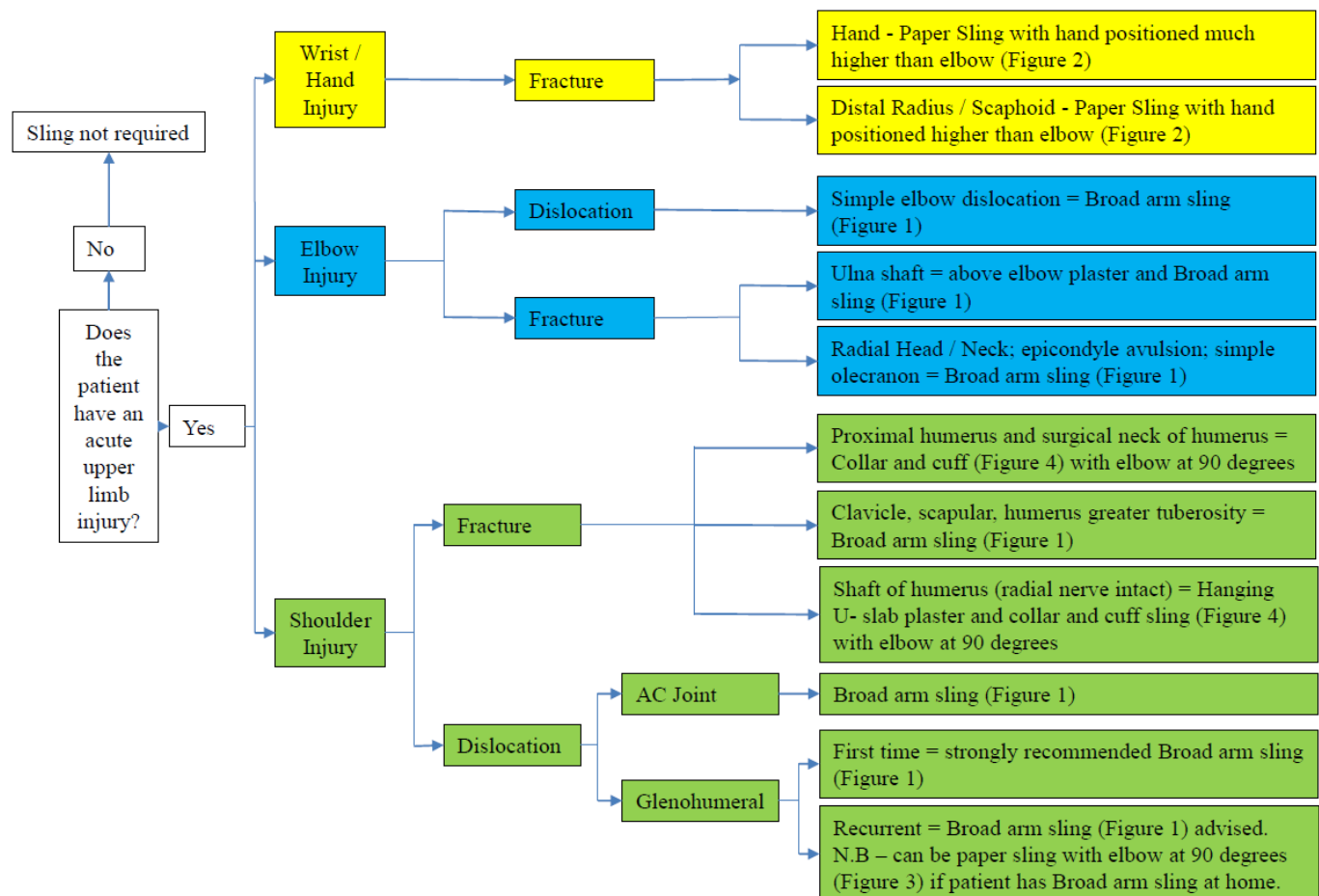
## PURPOSE and SCOPE

- Slings can be used to provide support, pain relief and treatment of upper limb injuries.
- This CPG aims to educate ED staff about the appropriate prescription and fitting of slings for different injuries.

## INDICATIONS

- Patients presenting with painful upper limb injury requiring slings

**Flowchart 1**



## POINTS TO CONSIDER

- When using a sling to immobilise an injury, it is important to maintain movement in the non-injured joints to prevent stiffness and manage distal swelling.
- Ensure that the forearm is supported all the way to the wrist, by placing the elbow in the corner of the sling pocket.

## PROCEDURE

- Refer to the flowchart (above) to determine which sling is required.
- Ensure patient has corresponding injury education brochure from EDCKB and is aware of sling care.
- Slings can be removed for hygiene and sleep when comfortable (**except for proximal / shaft / greater tuberosity humeral fractures**).
- Advise patient to monitor skin regularly for pressure areas.
- Advise gentle neck and finger exercises whilst in sling.
- Send paperwork to registration clerk to complete payment for broad arm slings.

**Figure 1: Canvas Broad Arm Sling**



**Figure 2: Paper Sling – hand elevated for hand/wrist injuries**



**Figure 3: Paper Sling – temporary sling only if patient has canvas sling at home.**



**Figure 4: Collar and Cuff Hanging Sling – elbow at 90 degrees.**



## RELATED DOCUMENTS

### Internal

- Appliance Purchase Agreement Form – In EPIC - Found under orders, take home equipment, sling.

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