



**REGION 11
CHICAGO EMS SYSTEM
PROCEDURE**

Title: Traction Splinting

Section: Trauma Management

Approved: EMS Medical Directors Consortium

EMS Level: BLS/ALS

TRACTION SPLINTING

INDICATIONS

- Stabilization of a closed mid-shaft femur fracture to reduce pain, prevent further injury, in a hemodynamically stable patient

CONTRAINDICATIONS

- Open fracture or partial amputation
- Hip or pelvis injury
- Knee or lower leg injury

EQUIPMENT

- Traction splint with all associated equipment (ankle hitch, straps, splint) –Adult or Pediatric size

PROCEDURE

1. Apply personal protective equipment: gloves.
2. Completely expose the injured area (extremity) – remove shoe and sock.
3. Directs application of manual stabilization of the injured leg [not necessary when using a unipolar device (Sager or similar) that is immediately available].
4. Directs application of manual traction (not necessary when using a unipolar device, but must be applied before elevating leg, if the leg is elevated at all).
5. Assess motor, sensory, and distal circulation in the injured extremity.
6. Assess pain scale and consider pain management.
7. Prepare and adjust splint to proper length.
8. Position the splint at the injured leg.
9. Apply proximal securing device (ischial strap).
10. Apply distal securing device (ankle hitch).
11. Apply appropriate mechanical traction.
12. Position and secure support straps.
13. Re-evaluate proximal/distal securing devices.



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14. Reassess motor, sensory, and circulatory functions in the injured extremity.
15. Secure splint and patient to long board or stretcher for transport.