

Fracture of the newborn's arm

**A parent's guide
to caregiving at home**

Pediatric Rehabilitation

Introduction

When a baby is born too quickly, or the baby is too big for the mother's birth canal, the baby's head can get delivered, but the shoulders and chest get stuck. This is a potentially deadly situation for the baby, because the umbilical cord is pinched during this time as well. Due to the risks to the baby, the doctor or nurse delivering the baby will do what is needed to make the delivery happen while avoiding pulling on the head or neck (which could cause permanent nerve damage to an arm).

Sometimes this means the collarbone can become broken. In other circumstances, the humerus (upper arm bone) can become broken. This can be a scary thing to learn about your baby, but it is a better outcome for the situation.

This booklet is to provide you information on your baby's care while the fractured arm is healing.

Please note also that this booklet is divided into two sections:

Section 1:

Fracture to the clavicle (collar bone) — Pages 1-4

Section 2:

Fracture to the humerus (upper arm above the elbow) — Pages 5-7

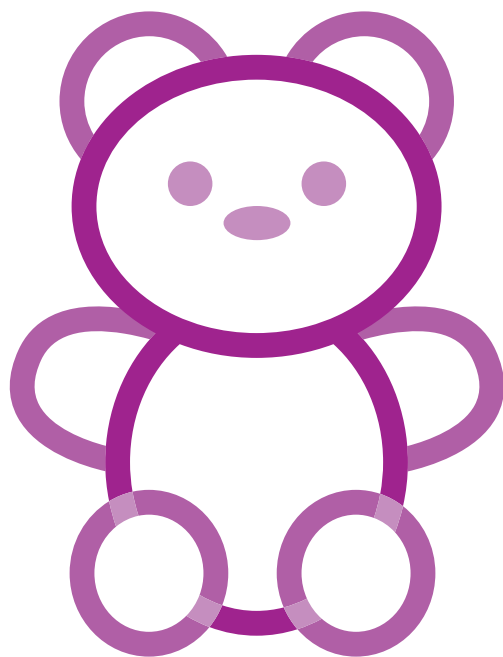
The caregiving management of these fractures is **VERY** different, so please focus only on the section that applies to your baby.

For baby _____, please refer to the

Clavicle section Humerus section

Section 1

Fracture to the clavicle (collar bone)

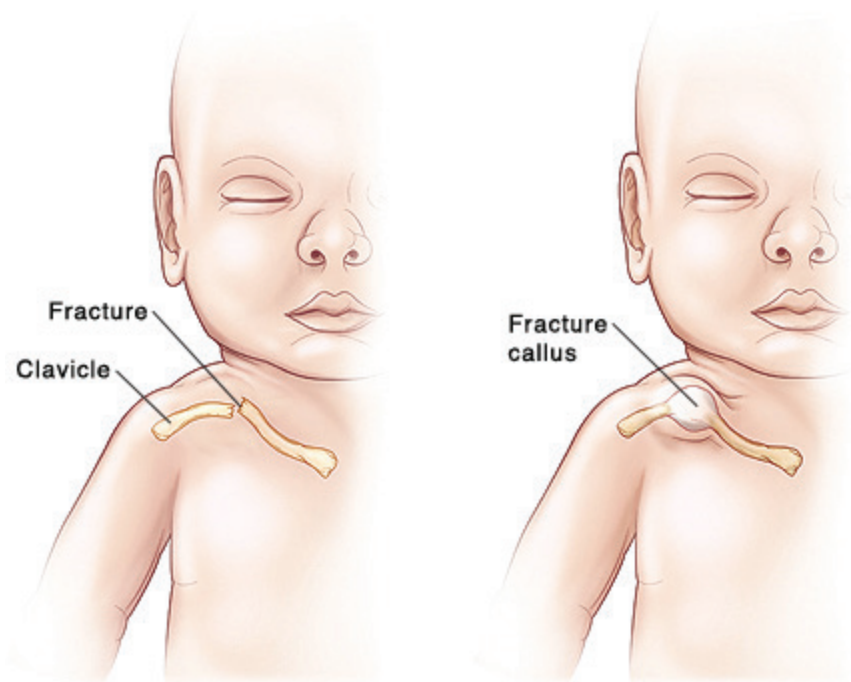


Care management of the infant with a clavicular fracture

Healing time of a fracture to the clavicle (collar bone) is estimated to be 2-3 weeks.

Generally, after about 10 days to 2 weeks, there is early bone healing (called callus) that gently holds the bone ends in place. About this time, your baby may be less bothered when the arm is disturbed.

At about 4-5 weeks, the healing callus is visible on X-ray, and you can really feel the huge bump of bone on your baby's collar bone. Do not worry. It is not a tumor and it will go away. This callus is a very strong bone and at this point, the bone is completely healed. Over the next few weeks to months, the bone will become more and more narrow so that about 3-4 months after birth, the bone is normal in appearance and function.



Source: www.saintlukeskc.org/health-library/when-your-child-has-clavicular-fracture-birth

In the end, the bone is normal. It is not more likely to break again, and will not be too long or too short. It will not be crooked. It will function normally throughout your baby's life.

During the 2-3 weeks of healing, the following recommendations in caregiving are given for the purpose of limiting any discomfort/pain your baby may experience due to a fractured clavicle.

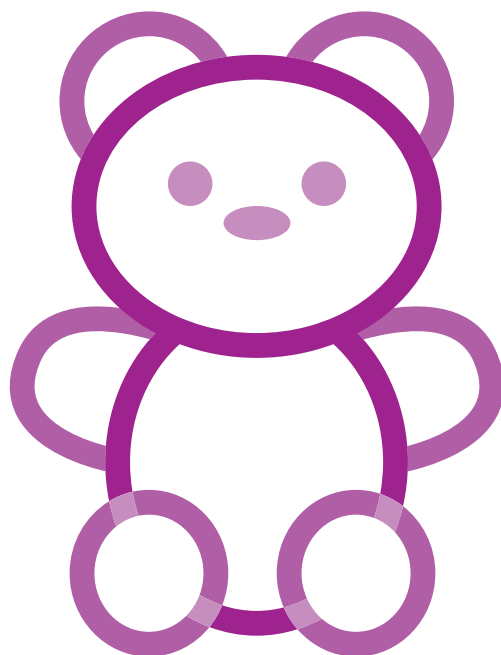
- Make sure the shoulder and arm are well supported when lifting or repositioning your baby by swaddling him/her with a blanket. Avoid letting the baby's arm hang without support. Do not, however, "bind" the arm to the body. Your baby's arm should be allowed to move freely when your baby is supported by a firm support when lying on his/her back.
- Avoid moving the affected arm with your hands under the arm. This will lift the clavicle upward and possibly cause your baby discomfort/pain.
- When moving the affected arm during your baby's caregiving, be sure not to lift the arm greater than 90 degrees at the shoulder forward/upward or to the side. This is to avoid unnecessary traction or upward lifting of the clavicle during dressing or bathing.



- Dress your baby in loosely fitting clothing so that it is easy to move the affected arm into and out of the sleeves, etc.
- When you are **dressing** your baby in a pullover-style shirt, place the sleeve on the affected arm first, lift the shirt over the head, and thread the opposite arm into the second sleeve.
- When you are **undressing** your baby wearing a pullover-style shirt, remove the opposite arm from its sleeve first, lift the shirt over the head, and slide the second sleeve off the affected arm last.
- When you are **dressing** your baby in an outfit having a front snapping/zipper closure, place the sleeve on the affected arm first, then the opposite arm in the second sleeve. Legs can be placed in the outfit last.
- When you are **undressing** your baby in an outfit having a front snapping/zipper closure, remove legs first, then the opposite arm from its sleeve before removing the affected arm from the remaining sleeve of the outfit.
- Make sure that your baby is turning his/her head to face in either direction. If he/she develops a preference by turning only to one side, it will affect his/her development. You may observe that your baby is initially facing away from the arm with the fracture. This is common but should resolve fairly quickly with healing of that arm.
- Watch your baby's spontaneous movements. Gradually, you should observe equal movements and range of movements of your baby's arms.
- Let your pediatrician know if you are noticing weakness or poor quality of movement of the affected arm compared to the opposite arm after 3 weeks of age.

Section 2

Fracture to the humerus (upper arm above the elbow)



Care management of the infant with a humeral fracture

The humerus is the single bone of the upper arm, above the elbow. For your baby's humeral fracture to heal, his/her arm needs to be "quiet" in terms of movement. Note that the humerus (bone) does not need to be lined up much at all to achieve perfect healing. The bone can be angulated 45 degrees, and the body will straighten it out on its own. It is a natural process.

- Your occupational therapist has created a bracing system to hold your baby's arm quiet during the process of caregiving. To the right is an example of this type of support for your baby.
- This bracing system is not to be removed until after your baby sees the pediatric orthopedic surgeon.
- Dress and undress your baby without removing the brace.



- An infant gown may be the easiest outfit to dress your baby in for the first few weeks of life.
- Dress only the opposite, unaffected arm and head, leaving the fractured arm under the clothing.
- Bathing your baby will also be limited with this bracing system on. Keep in mind that this is temporary until the humerus is healed and the brace can be removed.
- The pediatric orthopedic surgeon will see your baby at approximately 2 weeks of age as part of outpatient follow-up to a humeral fracture. You will then receive more information and further specifics on care management for your baby.
- Generally, after about 10 days to 2 weeks, there is early bone healing (called callus) that gently holds the bone ends in place. About this time, your baby may be less bothered when the arm is disturbed. He or she may start moving the hand and wrist at this time.
- At about 4-5 weeks, the healing callus is visible on X-ray, and you can really feel the huge bump of bone in your baby's arm. Do not worry. It is not a tumor and it will go away. This callus is very strong bone and at this point, the bone is completely healed. Over the next few weeks to months, the bone will become more and more narrow so that about 3-4 months after birth, the bone is normal in appearance and function. In the end, the bone is normal. It is not more likely to break again, and will not be too long or too short. It will not be crooked. It will function normally throughout your baby's life.

Notes and questions



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