

# Mallet Injuries in Children

This leaflet explains more about mallet injuries in children. If you have any further questions or concerns, please speak to the staff member in charge of your child's care.

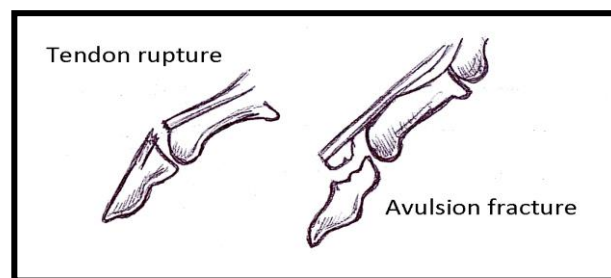
## What is a mallet injury?

This is a common injury to the tip of a finger or thumb.

The mechanism that straightens the end joint gets damaged and can no longer work to straighten the joint normally.

The tendon which attaches to the top of the end bone of each finger and thumb, just before the start of the fingernail, may break near its attachment point so it can no longer do its job of straightening the fingertip.

Sometimes this tendon can pull a small chunk of bone away from the attachment point. This is called an avulsion fracture and can be seen on an x-ray.



## What treatments are available?

Nearly all mallet injuries will heal well if the joint is protected in a splint (supporting device) for six weeks.

We will make your child a splint to protect the finger or thumb and keep it in the correct position.

The splint will be kept in place with tape. To keep the splint securely in place, the tape needs to be removed and replaced every five to seven days at home. This should be done by an adult, who should check and clean the child's skin at the same time.

Please make sure you tell the team about any allergies to any kind of plasters or tape and contact us if your child has any itching or redness around their splint.

**Your child's splint must be worn at all times and the injured joint must not bend** at all during the six weeks as this can undo any healing that has taken place so far. If this happens the six week splinting period must start again to ensure proper healing. Tell your

hand therapist straight away if your child's splint comes off or s/he bends the injured joint by accident.

You must also make sure you **do not get the splint wet** as this can make the skin underneath very sore.

You will be given a roll of zinc oxide tape and some lining tape so that you can look after your child's splint at home.

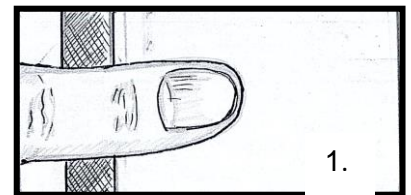
**How to safely change the tape on your child's splint** (this must always be done by an adult):

1. Before removing the splint, cut four pieces of the zinc oxide tape you have been given, all double the length of your child's splint. Attach them to the edge of the table.

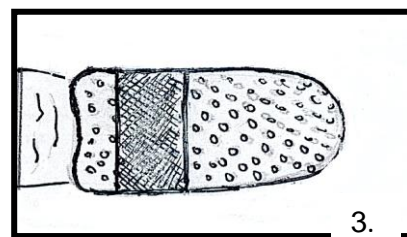
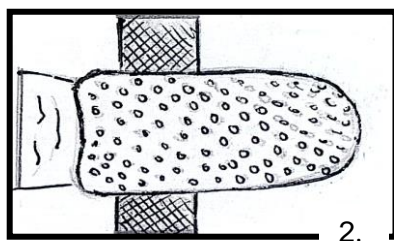
Also cut a piece of lining tape large enough to cover the inside of the splint, but do not remove the lining paper until you are ready to place it on the splint.

2. Carefully cut through the existing tape with a pair of small scissors, taking care not to make contact with your child's skin. Use your hand to make sure you keep your child's finger in the same position, once it is no longer supported by the tape. Place their hand flat on a table.
3. Use skin wipes to clean your child's finger, without lifting it up. Also use a wipe to clean the splint once you have removed all the old tape. Once the splint is dry, re-line the inside with the new piece of lining tape.

4. Place the first piece of tape sticky side up on the table. Without letting it bend, firmly but gently lift your child's finger and place it onto the tape just below the crease of the middle joint (see image 1).

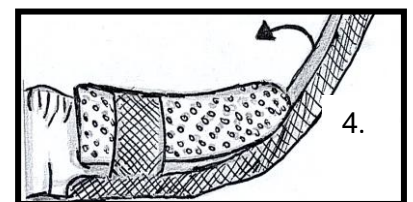


5. Place the splint on the top of the finger and secure the tape (see images 2 and 3).



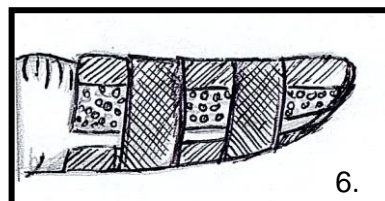
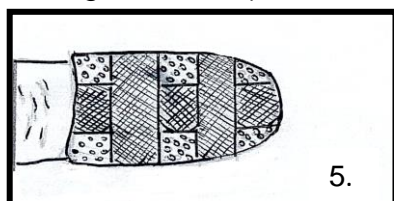
6. Place a second piece of tape, sticky side up, on the table. Lift the tip of the finger and secure a lengthways piece of tape from the middle joint.

Lift the fingertip up into the splint and secure the tape to the back of the splint (see image 4).



Repeat this step once more.

7. Finally, place a second horizontal strip of tape just below the first to secure everything in place (see images 5 and 6).



8. The splint should feel comfortable and secure, but not too tight. The hand therapist will show you how to check the blood supply to the end of your child's finger by pressing the skin at the tip so it goes white and watching to see if it returns to pink within two seconds. Your child should be able to bend the middle joint of the finger freely, with only the end joint held still.

### Remember

- Do not remove the splint
- Do not bend the injured joint
- Do not get the splint wet.

### What happens next?

You will normally see the hand therapist between one and two weeks after your child's first appointment. They will check the condition of your child's skin, the position of their splint and make sure you and your child are happy looking after the splint at home.

If you have problems managing the splint at home your child can be seen weekly in the Dragon Centre to clean the finger or thumb and replace the tape. Please talk to your hand therapist if you have any concerns.

After six weeks your child will see the hand therapist again, to check if the finger or thumb has healed enough to start reducing the time during the day when the splint is worn.

Your child should not need a splint at all after another two to four weeks and be able to return to sport after another four weeks.

### Useful sources of information

[www.nhs.uk/Conditions/mallet-finger/Pages/Introduction.aspx](http://www.nhs.uk/Conditions/mallet-finger/Pages/Introduction.aspx)

[www.bssh.ac.uk/patients/conditions/28/mallet\\_finger\\_injury](http://www.bssh.ac.uk/patients/conditions/28/mallet_finger_injury)

### Contact us

If you have any questions or concerns about mallet injuries in children, please contact the hand therapy team on 020 8725 1038 (this is an answerphone which is regularly checked).

If you need to change an appointment please call the **central bookings service** on **020 8725 0007**. Please give as much notice as possible when changing appointments.

If you miss an appointment without contacting us first, your child may be discharged from the service.

Out of hours, please contact the number above and leave a message.

**For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit [www.stgeorges.nhs.uk](http://www.stgeorges.nhs.uk)**

## Additional services

### Patient Advice and Liaison Service (PALS)

PALS can offer you on-the-spot advice and information when you have comments or concerns about our services or the care you have received. You can visit the PALS office between 9.30am and 4.30pm, Monday to Friday in the main corridor between Grosvenor and Lanesborough wings (near the lift foyer).

**Tel:** 020 8725 2453 **Email:** [pals@stgeorges.nhs.uk](mailto:pals@stgeorges.nhs.uk)

### NHS Choices

NHS Choices provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health.

**Web:** [www.nhs.uk](http://www.nhs.uk)

### NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.

**Tel:** 111

### AccessAble

You can download accessibility guides for all our services by searching 'St George's Hospital' on the AccessAble website ([www.accessable.co.uk](http://www.accessable.co.uk)). The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.



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