

## **Case of a contact burn from plaster splint**

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We present a case of a 7 year old girl who sustained a contact burn to left little finger following a plaster splint that was placed post reduction of a proximal phalanx fracture in theatre. She presented initially with an accidental fracture that had caused an angulated deformity of her little finger, requiring a general anaesthetic and manipulation to correct it. Post manipulation the little and ring fingers were buddy strapped and an ulna gutter splint applied. At the one week follow up there was skin breakdown on the ulna border with partial thickness skin loss. The burn was treated with dressings and required debridement and grafting, however the healing was complicated by infection requiring antibiotics, and partial graft failure. At four month follow up there was noted full thickness scar contracture and deformity of the little finger, requiring further surgery to release scar contracture.

### **Key Words**

Contact burn, plaster burn

### **Nominated Stream for Poster Presentations**

Care

Prevention

Research