

Pulled Elbow Proforma



University Hospitals Sussex
NHS Foundation Trust

the
alex
Emergency
Department

Clinician's Details

Name/stamp:

Date: Time:

PNP: ☐ Doctor: ☐ Nurse: ☐

Patient's Details

Name:

Date of Birth:

Trust ID & NHS Number:

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If "yes" to any question, discuss with CED senior & consider x-ray prior to manipulation

Was the injury unwitnessed?	Yes	No
Is the mechanism of injury inconsistent with a pulled elbow?	Yes	No
Is the child under 1 year or over 5 years of age?	Yes	No
Does the child have a moderate pain score?	Yes	No

Who's providing the history? Who witnessed the injury?

Date of injury: Time of injury:

Describe what happened:

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Any CP/NAI concerns?

Swelling/bony tenderness?

Clavicle	Yes	No
Humerus	Yes	No
Forearm / wrist	Yes	No
Hand	Yes	No

Full range of movement?

Shoulder	Yes	No
Elbow	Yes	No
Wrist	Yes	No

Other Comments

Manipulated? Yes No **Click felt?** Yes No

Diagnosis: Comments:.....

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Signed: