What? A Toddler’s Fracture is typically a spiral fracture of the tibia, either minimally or non-displaced. Common in children who are learning to walk, ages 9 months to 3 years. The vast majority of Toddler’s Fractures aren’t indicative of non-accidental injury.

Why? This can happen when a child falls and twists their leg with low energy. For example:

...their leg gets caught (whilst sitting on an adults lap) as they’re coming down a slide together.
...slipping off a toy on the carpet.

There are subtle signs to look for that can easily be missed...

- Won’t put foot down on the affected side (lifts leg up – stork position)
- Often no physical signs of a fracture but will not weight-bear.
- Axial load: place hand at knee and ankle, then gently twist the leg – this would elicit pain.

Anatomy of a Spiral Fracture

How? Once a fracture is suspected, what do we need to do next?

1. AP and lateral x-rays or analgesia
2. Read local guidance
3. Visible lucent line? Soft wrap/pop above knee and refer to fracture clinic
4. Not visible? Treat clinically, soft wrap/pop above knee and review in 2 weeks looking for periosteal reaction
5. Consider a Limp pathway if no trauma
6. Always think child protection! Safeguarding referral fracture under 2, Health Visitor form (ages 2-5 years)