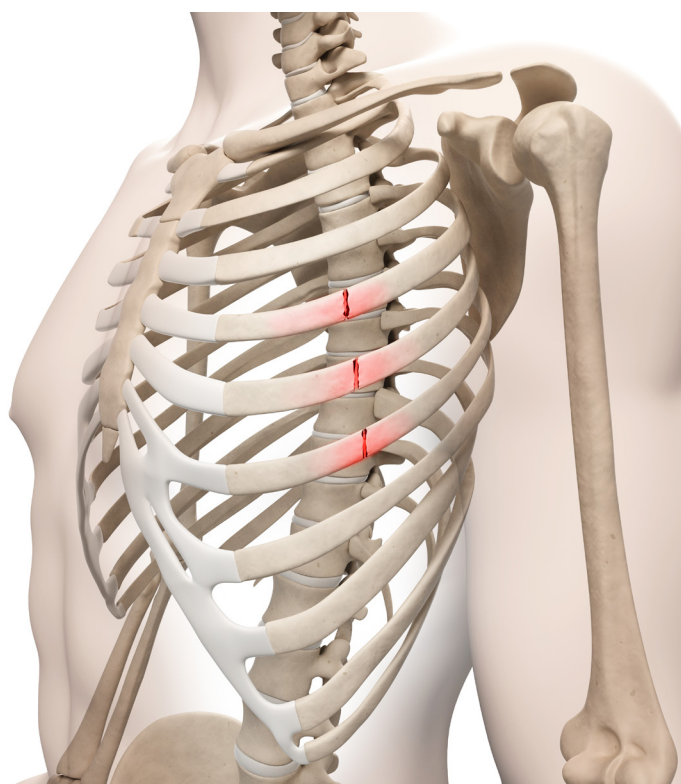


Chest injuries and rib fractures



Ribs make up your thoracic cage (chest) and are joined together by your sternum (breastbone) in front, and spine at the back. Ribs play an important role in helping you breathe and cough, and support your posture in sitting.

Treatment

Most chest injuries/rib fractures are managed conservatively and are treated with pain relief and normal movement whilst they are healing. Broken ribs can be very painful, and as a result make moving and breathing more difficult. If you cannot breathe well and cough strongly, you are at risk of complications such as lung collapse and chest infections.

What to expect

The amount of pain you feel and how long it lasts will depend on the extent of your injury. As a rough guide, fractured ribs take about 4-6 weeks to heal and it is usual to still feel some discomfort after this time. Most people notice a significant improvement in their pain in 5-7 days post injury.

Things to DO

- **Take regular pain relief** as advised by the doctor - this will assist you to take deep breaths and cough.
- **Keep mobile** e.g. walk around the house at a comfortable pace every hour while you are awake. This is one of the most effective ways to ensure your lungs are filling with air and to help clear phlegm.
- **Supported cough** - support your chest when coughing – you can support the painful area with a pillow, towel, or your hand. This will help to decrease the pain.
- **Keep your shoulders moving** with light everyday activities that you can manage without making your pain significantly worse (unless you have been told not to due to other injuries).
- **Monitor for complications** – For example ongoing or worsening shortness of breath, increasing chest pain despite using pain relief, worsening cough or discoloured phlegm, fevers, upper abdominal pain and dizziness.
 - If you have any of these symptoms, contact your doctor or Emergency Department immediately.

Things NOT to do

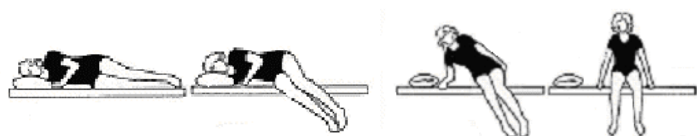
- **Don't stay lying down for long periods** - you will increase your risk of chest infections and blood clots.
- **Don't lift, pull or push** anything which makes the pain worse.
- **Avoid contact sport** for at least 6 weeks, unless told otherwise by your doctor.

Exercises and activities to do to help your recovery

Bed mobility

The following can be the easiest way for you to move when getting in and out of bed.

- Bend both knees, roll on to your side keeping hips and shoulders in line.
- Slide your feet over the edge of the mattress, at the same time as pushing up onto your arm and use your other hand to help you sit upright.



Supported cough

It is important to produce a strong cough so that phlegm in the lungs can be cleared. To support your chest when coughing use a pillow, towel, or your hands to support your damaged ribs to help minimise discomfort. Cough when you need to and support your chest when doing so.

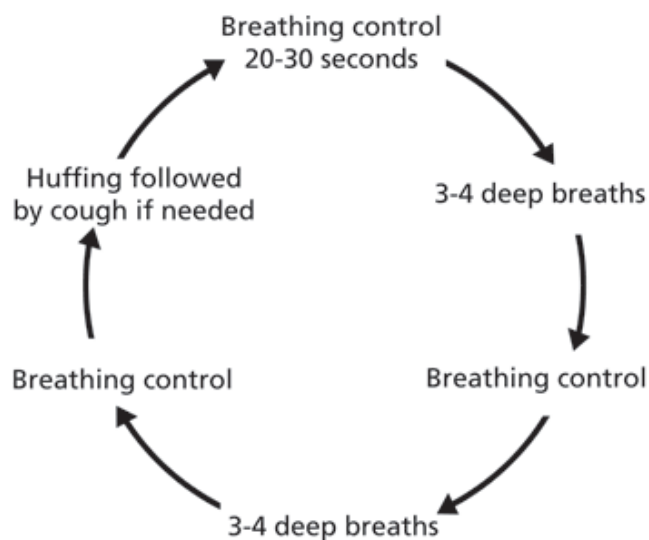


Huff

Huffs help shift the phlegm, are gentler and require less effort than coughing. To huff, open your throat and mouth wide and complete a **gentle but forced breath out through an open mouth** – like you are trying to fog up glasses to clean them.

Remember to squeeze – not wheeze.

Deep breathing exercises – active cycle of breathing technique



Repeat _____ times, every _____ hours.

Instructions

Warning: if you develop a fever, a worsening cough, have trouble breathing, cough up thick phlegm, notice a change in colour or increased amount of phlegm – contact your GP or Emergency Department immediately.



Partnering with Consumers - This patient information brochure supports National Safety and Quality Health Service Standard 2. Consumers and/or carers provided feedback on this patient information.



Based on: Oxford University Hospitals NHS handouts; Logan Hospital Emergency Department handouts; New South Wales Emergency Department.

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