

# Rib Fracture

A rib fracture is a break or crack in one or more of your ribs. Your ribs are the bones that protect your chest.

Rib fractures can be very painful because your ribs move when you breathe.



## What to Expect

Here are some of the symptoms you might have:

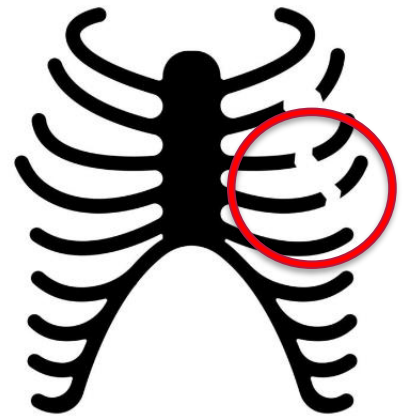
- Pain that is worse when moving or breathing.
- Bruising, swelling, and redness.
- A small popping or crackling sensation when the injured area is touched.
- Difficulty taking deep breaths or coughing.

Breathing differently because of pain can also lead to:

- Feeling short of breath or anxious.
- Feeling lightheaded or tired.
- Headaches.

Your symptoms will gradually improve with time. Rib fractures typically heal on their own within 4-6 weeks. Most people do not need surgery. Do not tape or wrap your chest – this can prevent you from taking normal deep breaths.

People with a rib fracture tend to take shallow breaths to avoid pain, but this puts you at risk for an infection in your chest or lungs (this is called pneumonia). It is very important to control your pain so you can take deep breaths and cough to prevent an infection.



### Recommended Follow-Up

- Follow up in \_\_ days.

Name of Provider

Reason

Date/Time

Location

Contact Info

- \_\_\_\_\_
- \_\_\_\_\_



## When to Get Help

### Go to the nearest Emergency Department or Urgent Care Centre if:

- You have severe shortness of breath or new difficulty breathing.
- You have severe uncontrolled pain, new or increasing chest pain.
- You feel lightheaded, dizzy, or faint.
- You cough up blood.
- You develop a fever (>38.0°C) or a new cough.

### Go to a walk-in clinic, your health care provider, or call 811 (711) if:

- Your pain is difficult to control at home.
- You find it hard to breathe deeply or cough.
- Your symptoms do not improve as expected.

### To Learn More:

- Ask your health care provider.
- HealthLinkBC - call 8-1-1 (7-1-1 for deaf or hard of hearing) or go online to [www.HealthLinkBC.ca](http://www.HealthLinkBC.ca).



## How to Care for Yourself at Home

### Rest and Activity

- For the first 2 to 3 weeks, avoid putting pressure on your ribs or strenuous activities that increase your pain such as heavy lifting/pulling.
- Continue to be mobile (e.g., walking) and do simple day-to-day activities. Increase your activity gradually as your pain improves.
- Avoid lying down or complete rest for long periods of time.
- Speak to your family doctor or nurse practitioner about returning to sports or physical work.



### Breathing Exercises

- Take 5-10 slow deep breaths every hour while you are awake. Breathe in slowly through your nose, feeling your chest expand, and

## Rib Fracture Discharge Instructions - continued

then breathe out slowly through your mouth. This will help keep your lungs clear.

- Once your pain is under control, cough deeply once an hour and when you need to. It may be painful, but it is important to clear your lungs. You can support your chest with a pillow or rolled up towel if it reduces your pain.

### Smoking

- Avoid smoking or vaping while you are healing to reduce your risk of an infection.

### Posture

- When sitting or standing, try to maintain good posture. This will help your fracture heal in the right position.
- You may need to use pillows to position yourself comfortably while you sleep.

### Pain Control

- Try placing an ice pack or warm compress on the painful area for 20 minutes at a time, once an hour, while you are awake. Wrap it in a thin cloth to avoid direct contact with your skin.
- You can also try using the medications described below.

### Medication



#### IBUPROFEN (E.G., ADVIL<sup>®</sup>, MOTRIN<sup>®</sup>)

- 200-400 mg every 4–6 hours as needed while awake, taken with small snack (max. 1200mg/day).
- Avoid taking this medication for longer than 5-7 days. See your primary care provider if you need to use this for longer.
- Avoid this medication if you are more than 65 years old, pregnant or have the following conditions: severe liver or kidney disease, peptic ulcer disease, or heart failure. Speak to your primary care provider before taking this if you have a history of stroke, GERD, inflammatory bowel disease, liver cirrhosis or ischemic vascular disease.
- Don't take this with other NSAID medications like naproxen (e.g., Aleve<sup>®</sup>) or celecoxib (e.g., Celebrex<sup>®</sup>).

## Notes:

## Rib Fracture Discharge Instructions - continued

### ACETAMINOPHEN (E.G., TYLENOL®)

- 500-1000 mg every 6 hours as needed while awake, with water (max. 4000mg/day).

If you have liver disease:

- Maximum dose: 3000mg per day.
- Do not use this medicine for longer than 5-7 days. Speak to your primary care provider if you need to use this for longer.

If you drink more than 3 alcoholic beverages per day:

- Maximum dose: 3000mg per day.

Be careful not to exceed the maximum dose when taking this medication with other medication that contain acetaminophen (e.g., Dayquil/Nyquil®).

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Find this information sheet on the ECBC website:  
[https://emergencycarebc.ca/clinical\\_resource/patient-information-sheet/rib-fractures/](https://emergencycarebc.ca/clinical_resource/patient-information-sheet/rib-fractures/)

## Notes:

### Additional Information

- ECBC Pain Control Discharge Instructions: <https://emergencycarebc.ca/wp-content/uploads/2021/08/Pain-Control-1.pdf>
- Broken rib article (HealthLink BC): <https://www.healthlinkbc.ca/illnesses-conditions/injuries/broken-rib>
- Instructions for care at home (Video): <https://www.youtube.com/watch?v=3NF1OPeysUQ>

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