

Salter-Harris Classification of Pediatric Fractures

- **Salter-Harris type one**
 - Separation of the epiphysis from the metaphysis without fracture
 - Primarily in younger children
 - Shearing or avulsion force
 - ALL lateral ankle sprains in children should be treated like a SH1
- **Salter-Harris type two**
 - Fracture line extends along the physis for a variable distance then extends through a portion of the metaphysis
 - Shearing or avulsion force
 - **“Thurston-Holland Sign”**- triangular shaped metaphyseal fragment
- **Salter-Harris type three**
 - Intraarticular fracture that extends from the joint surface to the physis and then along the epiphyseal plate to the periphery
 - Due to intraarticular shearing forces
 - (Metaphysis is intact; fracture goes through physis)
- **Salter-Harris Type Four**
 - Intraarticular fracture extending from the joint surface through the epiphysis and the physis, and then into the metaphysis
 - Poor prognosis
 - Must line the two edges up properly for healing
- **Salter-Harris Type Five**
 - Compression fracture
 - Force is transferred across the physis
 - Compaction of germinal cells in the growth region of the physis
 - Severe crushing injury
 - Poor prognosis because the cells are dead