

Fractured Ribs

Understanding fractured ribs

Rib fractures are one of the most common injuries to the chest. Ribs will usually fracture at the point of impact or towards the back, where they are weakest.

Typically, this causes pain on deep breathing and coughing, and tenderness over one or more ribs.

Chest X-rays may not show the broken rib but are useful to check for underlying lung injury. The findings may help to make the correct diagnosis.

There is potential for underlying organ injury when ribs are fractured; your doctor or health practitioner will assess you to exclude this.

Know the Facts

- Pain may get worse for a week and last for up to eight weeks. If you are discharged from the emergency department it is important that you understand the information your doctor gives you about pain relief medications.
- Older people, smokers, those with lung disease and people with multiple rib fractures are more at risk of developing complications such as pneumonia.

Tips to help your recovery

- The most important thing is to get any pain under control. Breathing exercises will not be effective unless your pain is controlled.
- Take your pain relieving medications regularly, as prescribed by your doctor, and continue to speak with your local doctor or pharmacist about maintaining your pain relief. The medications should provide a good and constant level of pain control and avoid peaks of pain.
- Strenuous activities should be avoided for the first 3-4 weeks, after which physical activity may be recommenced as pain allows. If the pain is increasing you may be doing too much. Talk to your doctor or physiotherapist about this.
- Avoid contact sports for at least 6 weeks to prevent further damage, unless otherwise advised by your doctor or physiotherapist.



If you develop fever, an uncontrollable cough, abdominal pain, have trouble breathing or cough up thick or discoloured phlegm – contact your doctor or hospital immediately.

