

Management of Pediatric Supracondylar Humerus Fractures

Appropriate Use Criteria

Adopted by:

The American Academy of Orthopaedic Surgeons Board of Directors
September 5, 2014

Disclaimer

Volunteer physicians from multiple medical specialties created and categorized these Appropriate Use Criteria. These Appropriate Use Criteria are not intended to be comprehensive or a fixed protocol, as some patients may require more or less treatment or different means of diagnosis. These Appropriate Use Criteria represent patients and situations that clinicians treating or diagnosing musculoskeletal conditions are most likely to encounter. The clinician's independent medical judgment, given the individual patient's clinical circumstances, should always determine patient care and treatment.

Disclosure Requirement

In accordance with American Academy of Orthopaedic Surgeons policy, all individuals whose names appear as authors or contributors to this document filed a disclosure statement as part of the submission process. All authors provided full disclosure of potential conflicts of interest prior to participation in the development of these Appropriate Use Criteria. Disclosure information for all panel members can be found in Appendix B.

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FDA Clearance

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The AAOS Appropriate Use Criteria
for the Management of Pediatric Supracondylar Humerus Fractures
is also available on our website at
www.aaos.org/auc

To access the AUC web-based application, please visit
www.aaos.org/aucapp

To access the interactive literature review developed for this AUC
please visit:
<http://aaos.webauthor.com/go/peer/>

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I. INTRODUCTION

OVERVIEW

The American Academy of Orthopaedic Surgeons (AAOS) has developed this Appropriate Use Criteria (AUC) to determine appropriateness of various health care services for pediatric supracondylar fractures. An “appropriate” healthcare service is one for which the expected health benefits exceed the expected negative consequences by a sufficiently wide margin.² Evidence-based information, in conjunction with the clinical expertise of physicians from multiple medical specialties, was used to develop the criteria in order to improve patient care and obtain the best outcomes while considering the subtleties and distinctions necessary in making clinical decisions. The foundation for this AUC is the 2011 Treatment of Pediatric Supracondylar Humerus Fractures Clinical Practice Guideline, which can be accessed via the following link: http://www.aaos.org/research/guidelines/SupracondylarFracture/SupracondylarFracture_Guideline.asp

The purpose of this AUC is to help determine the appropriateness of clinical practice guideline recommendations for the heterogeneous patient population routinely seen in practice. The best available scientific evidence is synthesized with collective expert opinion on topics where gold standard randomized clinical trials are not available or are inadequately detailed for identifying distinct patient types. When there is evidence corroborated by consensus that expected benefits substantially outweigh potential risks, exclusive of cost, a procedure is determined to be appropriate. The AAOS uses the RAND/UCLA Appropriateness Method (RAM).² Our process includes these steps: reviewing the results of the evidence analysis, compiling a list of clinical vignettes, and having an expert panel comprised of representatives from multiple medical specialties to determine the appropriateness of each of the clinical indications for treatment as “Appropriate,” “May be Appropriate,” or “Rarely Appropriate.”

To access an intuitive and more user-friendly version of the appropriate use criteria for this topic online, please visit our AUC web-based application at www.aaos.org/aucapp.

These criteria should not be construed as including all indications or excluding indications reasonably directed to obtaining the same results. The criteria intend to address the most common clinical scenarios facing all appropriately trained surgeons and all qualified physicians managing patients under consideration for managing pediatric supracondylar humerus fractures. The ultimate judgment regarding any specific criteria should address all circumstances presented by the patient and the needs and resources particular to the locality or institution. It is also important to state that these criteria were developed as guidelines and are not meant to supersede clinician expertise and experience or patient preference.

INTERPRETING THE APPROPRIATENESS RATINGS

To prevent misuse of these criteria, it is extremely important that the user of this document understands how to interpret the appropriateness ratings. The appropriateness rating scale ranges from one to nine and there are three main range categories that determine how the median rating is defined (i.e. 1-3 = “Rarely Appropriate”, 4-6 = “May Be Appropriate”, and 7-9 = “Appropriate”). Before these appropriate use criteria are consulted, the user should read through and understand all contents of this document.

ASSUMPTIONS OF THE WRITING PANEL

BEFORE THESE APPROPRIATE USE CRITERIA ARE CONSULTED, IT IS ASSUMED THAT:

1. The patient is healthy enough to undergo surgery if indicated.
2. A thorough history and physical examination of the patient has been conducted with special attention to the integumentary system, other injuries, neurologic and vascular exam and other medical problems. If the patient is too young or incapable of cooperating, this will be noted in the patient record.
3. Adequate radiographs have been obtained and examined by the clinician.
4. The surgeon or surgeons who care for this child can perform the appropriate orthopaedic procedures.
5. The surgery, when indicated, will be performed in a timely fashion to allow ideal treatment of the fracture with special consideration given to neurovascular status, soft tissue swelling, and family situation.
6. The surgeon will perform the surgery in an appropriate location. Some supracondylar humerus fractures patients may require in-hospital monitoring.
7. The facility has proper implants, ancillary equipment available, and capable support personnel.
8. If a patient has an open fracture, antibiotic administration and appropriate wound care are performed in a timely fashion.
9. The patient can be splinted in a position of comfort and monitored adequately while awaiting operating room (OR) availability.
10. The fracture occurs in a patient with open physes and is a pediatric pattern that does not require open reduction and dual plating construct (e.g. an adult pattern intercondylar distal humerus fracture).
11. Particular care will be taken in children before distal humeral epiphyseal ossification (e.g. newborns, infants, and toddlers) to assess for the possibility of transphyseal or low supracondylar humerus fracture (arthrogram, MRI, etc.).
12. Those patients, especially under the age of two, with fracture severity inconsistent with the described mechanism should be assessed for the possibility that this fracture resulted from non-accidental injury.
13. Type III fractures and those with significant pain or swelling will be monitored in-hospital by a qualified clinician for changes in neurologic, vascular or pain status until access to the OR is available.
14. The facility has the ability to evaluate and treat compartment syndrome emergently. Patient is NPO ready for anesthesia; however, NPO status should not delay patient's surgery if the limb is in jeopardy.
15. Direct manipulation at fracture site through an incision or preexisting wound is considered open reduction.
16. The open soft tissue envelope refers to the soft tissue associated with the supracondylar humerus fracture and no other associated injuries.
17. For closed fractures, open reduction assumes closed measures were tried, and failed.
18. For new onset nerve deficit after fracture treatment, the surgeon will reassess the fracture reduction and fixation for possible nerve injury.

ETIOLOGY

Supracondylar fractures of the humerus in children are the result of trauma to the elbow, most often a fall from height or related to sports or leisure activities.³

INCIDENCE

Supracondylar humerus fractures are widely considered the most common fracture of the elbow in children. The annual rate of children who present with supracondylar fractures has been estimated at 177.3 per 100,000.³

BURDEN OF DISEASE

There are many components to consider when calculating the overall cost of treatment for pediatric supracondylar fractures of the humerus.⁴ The main considerations are the relative cost and effectiveness of each treatment option. However, hidden costs for pediatric patients must also be considered. These costs include the additional home care required for a patient, the costs of rehabilitation and of missed school for the patient, child care costs if both parents work, and time off of work required by one or both parents to care for the pediatric patient.

EMOTIONAL AND PHYSICAL IMPACT

The potential deformity of the arm at the elbow including varus deformity, prolonged loss of mobility, and absence from school often associated with the treatment of pediatric supracondylar fractures of the humerus can have adverse physical, social, and emotional consequences for the child as well as the child's family. Treatments that minimize these concerns are therefore desirable.

POTENTIAL BENEFITS, HARMS, AND CONTRAINDICATIONS

Most treatments are associated with some known risks, especially invasive and operative treatments. Contraindications vary widely based on the treatment administered. A particular concern when managing supracondylar humerus fractures is the potential for this fracture to cause vascular compromise of the limb, which can lead to long term loss of nerve and/or muscle function. Additional factors may affect the physician's choice of treatment including but not limited to associated injuries the patient may present with as well as the individual's co-morbidities, skeletal maturity, and/or specific patient characteristics including obesity. Clinician input based on experience increases the probability of identifying patients who will benefit from specific treatment options. The individual patient's family dynamic will also influence treatment decisions therefore, discussion of available treatments and procedures applicable to the individual patient rely on mutual communication between the patient's guardian and physician, weighing the potential risks and benefits for that patient. Once the patient's guardian has been informed of available therapies and has discussed these options with his/her child's physician, an informed decision can be made.

II. METHODS

This AUC for Management of Pediatric Supracondylar Humerus Fractures is based on a review of the available literature regarding treatment of pediatric supracondylar humerus fractures and a list of clinical scenarios (i.e. criteria) constructed and voted on by experts in orthopaedic surgery and other relevant medical fields. This section describes the methods adapted from the RAND/UCLA Appropriateness Method (RAM)². This section also includes the activities and compositions of the various panels that developed, defined, reviewed, and voted on the criteria.

Three panels participated in the development of the AAOS AUC for Management of Pediatric Supracondylar Humerus Fractures (see list on [page i](#)). Members of the writing panel developed a list of 220 patient scenarios and 14 treatments. The review panel reviewed these scenarios and treatments independently to ensure that they were representative of patients and scenarios clinicians are likely to encounter. The voting panel participated in two rounds of voting. During the first round of voting, the voting panel was given approximately one month to independently rate the appropriateness of the ten treatments for the 220 patient scenarios as ‘Appropriate’, ‘May Be Appropriate’, or ‘Rarely Appropriate’ via an electronic ballot. After the first round of appropriateness ratings were submitted, AAOS staff calculated the median ratings for each patient scenario and specific treatment. An in-person voting panel meeting was held in Rosemont, IL on August 12th of 2014. During this meeting, voting panel members addressed the scenarios/treatments which resulted in disagreement (definition of disagreement can be found in Table 3). The voting panel members were asked to rerate their first round ratings during and after the voting panel meeting, only if they were persuaded to do so by the discussion and available evidence. Voting occurred during the in-person meeting and continued for approximately one week following the meeting. The voting panel determined appropriateness by rating scenarios (i.e. criteria) as ‘Appropriate’, ‘May Be Appropriate’, or ‘Rarely Appropriate’. There was no attempt to obtain consensus about appropriateness.

AAOS Appropriate Use Criteria Section, the AAOS Council on Research and Quality, and the AAOS Board of Directors sequentially approved the Appropriate Use Criteria for Management of Pediatric Supracondylar Humerus Fractures. AAOS submits this AUC to the National Guidelines Clearinghouse and, in accordance with the National Guidelines Clearinghouse criteria, will update or retire this AUC within five years of the publication date.

DEVELOPING CRITERIA

Members of the AUC for Management of Pediatric Supracondylar Humerus Fractures writing panel, who are orthopaedic specialists in treating knee-related injuries/diseases, developed clinical scenarios using the following guiding principles:

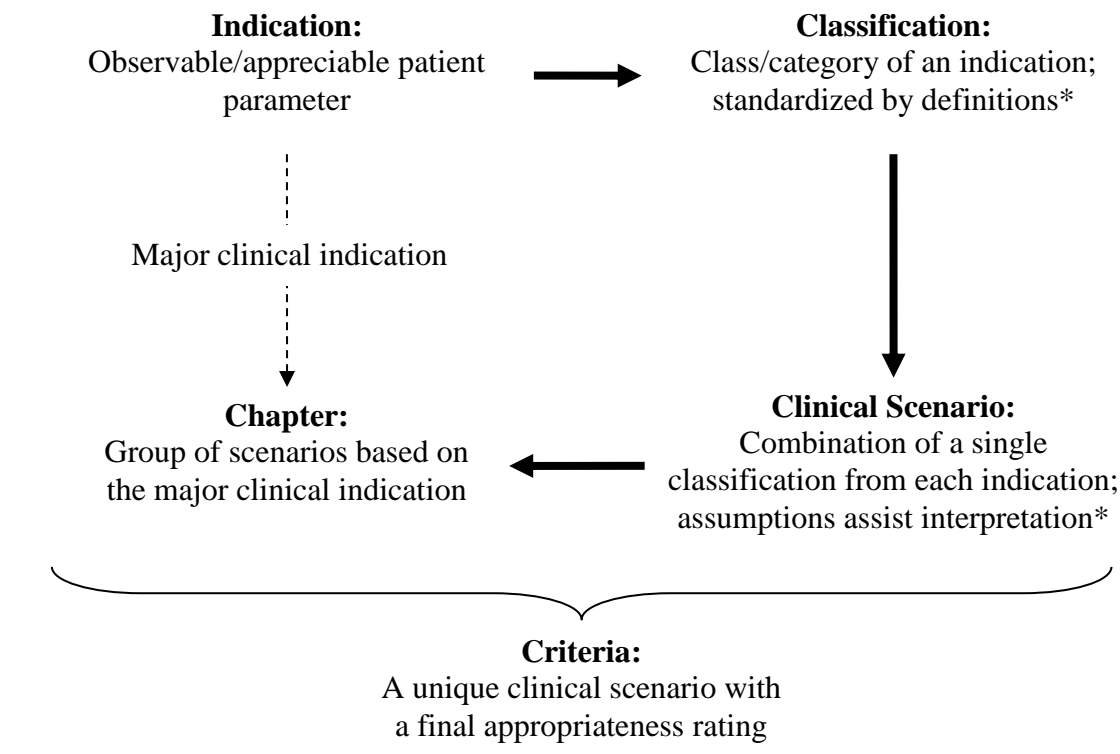
- Patient scenarios must include a broad spectrum of patients that may be eligible for treatment of pediatric supracondylar humerus fractures [*comprehensive*]
- Patient indications must classify patients into a unique scenario [*mutually exclusive*]
- Patient indications must consistently classify similar patients into the same scenario [*reliable, valid indicators*]

The writing panel developed the scenarios by categorizing patients in terms of indications evident during the clinical decision making process (Figure 1). These scenarios relied upon definitions and general assumptions, mutually agreed upon by the writing panel during the development of the scenarios. These definitions and assumptions were necessary to provide consistency in the interpretation of the clinical scenarios among experts voting on the scenarios and readers using the final criteria.

FORMULATING INDICATIONS AND SCENARIOS

The AUC writing panel began the development of the scenarios by identifying clinical indications typical of patients commonly presenting with pediatric supracondylar humerus fractures in clinical practice. Indications are most often parameters observable by the clinician, including symptoms or results of diagnostic tests. Additionally, “human factor” (e.g. activity level) or demographic variables can be considered.

Figure 1. Developing Criteria



Indications identified in clinical trials (derived from patient selection criteria) included in AAOS Clinical Practice Guidelines served as a starting point for the writing panel and ensured that these Appropriate Use Criteria referred to the evidence base for the Treatment of Pediatric Supracondylar Humerus Fractures CPG. The writing panel considered this initial list and other

indications based on their clinical expertise and selected the most clinically relevant indications ([Table 4](#)). The writing panel then defined distinct classes for each indication in order to stratify/categorize the indication ([Table 4](#)).

The writing panel organized these indications into a matrix of clinical scenarios that addressed all combinations of the classifications. The writing panel was given the opportunity to remove any scenarios that rarely occur in clinical practice, but agreed that all scenarios were clinically relevant. The major clinical decision making indications chosen by the writing panel divided the matrix of clinical scenarios into chapters, as follows: fracture type, vascular status, associated nerve injuries, soft tissue envelope, ipsilateral radius and/or ulna fracture, and degree of swelling ([Table 4](#)).

CREATING DEFINITIONS AND ASSUMPTIONS

The AUC for Management of Pediatric Supracondylar Humerus Fractures writing panel constructed concise and explicit definitions for the indications and classifications. This standardization helped ensure the way that the writing panel defined fracture type, vascular status, associated nerve injuries, soft tissue envelope, ipsilateral radius and/or ulna fracture, and degree of swelling was consistent among those reading the clinical scenario matrix or the final criteria. Definitions drew explicit boundaries when possible and were based on standard medical practice or existing literature.

Additionally, the writing panel formulated a list of general assumptions in order to provide more consistent interpretations of a scenario (see [Assumptions of the Writing Panel](#)). These assumptions differed from definitions in that they identified circumstances that exist outside of the control of the clinical decision making process.

Assumptions also addressed the use of existing published literature regarding the effectiveness of treatment and/or the procedural skill level of physicians. Additionally, assumptions highlighted intrinsic methods described in this document such as the role of cost considerations in rating appropriateness or the validity of the definition of appropriateness. The main goal of assumptions was to focus scenarios so that they apply to the average patient presenting to an average physician at an average facility.¹

The definitions and assumptions should provide all readers with a common starting point in interpreting the clinical scenarios. This list of definitions and assumptions accompanied the matrix of clinical scenarios in all stages of the development of this AUC and appears in the Assumptions of the Writing Panel section of this document.

VOTING PANEL MODIFICATIONS TO WRITING PANEL MATERIALS

At the start of the in-person voting panel meeting, the voting panel was reminded that they have the ability to amend the original writing panel materials if the amendments resulted in more clinically relevant and practical criteria. In order to amend the original materials, the voting panel members were instructed that a member must make a motion to amend and another member must “second” that motion, after which a vote is conducted. If a majority of voting panel members voted “yes” to amend the original materials, the amendments were accepted.

The voting panel opted to make the following amendments/additions to the original AUC materials:

- 1) Expanded the original “open” option under the “Soft Tissue Envelope” chapter heading to “Open-Appears Contaminated” and “Open-Concern for Contamination and/or Significant Soft Tissue Injury”.
- 2) Remove scenarios reflecting Type II fractures with open wounds due to clinical rarity/irrelevance.
- 3) Remove scenarios reflecting transphyseal fractures with open wounds due to clinical rarity/irrelevance.
- 4) Added assumptions 15-18 (see Assumptions List).
- 5) Redefined the vascular status sub-indications to read:
 - a) Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) *without* palpable distal pulse
 - b) Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) *without* palpable distal pulse
 - c) Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) *with* palpable distal pulse
- 6) Removed “Semi-Elective” from “Semi-Elective or Outpatient” surgical timing options. This timing option now reads “Outpatient”.

LITERATURE REVIEW

Concurrent with the writing panel developing the criteria, the AAOS Evidence-Based Medicine Unit undertook a literature review based on the results of the AAOS Clinical Practice Guideline on Treatment of Pediatric Supracondylar Humerus Fractures and all literature published after the release of the clinical practice guideline related to the treatment of pediatric supracondylar humerus fractures. This literature review informed the decisions relevant to the indications identified by the writing panel when they were available and necessary. The literature review also considered lower quality evidence when the best available evidence (i.e. randomized control trials) did not contain information relevant to the clinical scenarios. The full results of the literature review can be reviewed by visiting the AAOS PEER (Presentation and Evaluation of Evidence-Based Research) Tool at <http://aaos.webauthor.com/go/peer/>.

AAOS published the Clinical Practice Guideline on the Treatment of Pediatric Supracondylar Humerus Fractures on September 24th, 2011.

REVIEWING SCENARIOS

After the writing panel developed the scenarios, the AUC for Management of Pediatric Supracondylar Humerus Fractures review panel reviewed the proposed chapters in order to ensure that they were representative of patients and scenarios clinicians are likely to encounter. The review panel was comprised of both orthopaedic surgeons who routinely perform treatments for pediatric supracondylar humerus fractures and other specialties that may refer patients with pediatric supracondylar humerus fractures to a specialist. No member of this panel participated in the writing panel's initial development of the scenarios or participated in the voting panel's appropriateness rating of the scenarios.

Review panel members considered the lists of scenarios, definitions, assumptions, and the literature review associated with each scenario. Each independent reviewer suggested potential modifications to the content or structure of the lists and literature review. The writing panel provided the final determination of modifications to the indications, scenarios, assumptions, and literature review that would be included in the materials sent to the voting panel.

DETERMINING APPROPRIATENESS VOTING PANEL

A multidisciplinary panel of clinicians was assembled to determine the appropriateness of treatments for pediatric supracondylar humerus fractures. This group consisted of approximately 50% specialists and 50% non-specialists. Two non-voting moderators, who are orthopaedic surgeons but are not specialists in the treatment of pediatric supracondylar humerus fractures, facilitated the voting panel. The moderators were familiar with the methods and procedures of AAOS Appropriate Use Criteria and led the panel (as non-voters) in discussions. Additionally, no member of the voting panel was involved in the development (writing panel) or independent review (review panel) of the scenarios.

The voting panel used a modified Delphi procedure to determine appropriateness ratings. The voting panel participated in two rounds of voting while considering evidence-based information provided in the literature review. While cost is often a relevant consideration, panelists focused

their appropriateness ratings on the effectiveness of treatment for pediatric supracondylar humerus fractures.

RATING APPROPRIATENESS

When rating the appropriateness of a scenario, the voting panel considered the following definition:

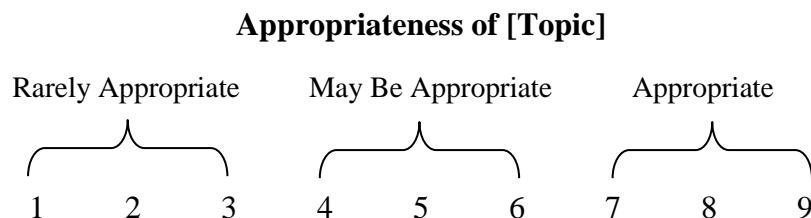
“An appropriate treatment for pediatric supracondylar humerus fractures is one for which the treatment **is** generally acceptable, **is** a reasonable approach for the indication, and **is** likely to improve the patient’s health outcomes or survival.”

They then rated each scenario using their best clinical judgment, taking into consideration the available evidence, for an average patient presenting to an average physician at an average facility as follows:

Table 1 Interpreting the 9-Point Appropriateness Scale

Rating	Explanation
7-9	Appropriate: Appropriate for the indication provided, meaning treatment is generally acceptable and is a reasonable approach for the indication and is likely to improve the patient’s health outcomes or survival.
4-6	May Be Appropriate: Uncertain for the indication provided, meaning treatment may be acceptable and may be a reasonable approach for the indication, but with uncertainty implying that more research and/or patient information is needed to further classify the indication.
1-3	Rarely Appropriate: Rarely an appropriate option for management of patients in this population due to the lack of a clear benefit/risk advantage; rarely an effective option for individual care plans; exceptions should have documentation of the clinical reasons for proceeding with this care option (i.e. procedure is not generally acceptable and is not generally reasonable for the indication).

Each panelist uses the scale below to record their response for each scenario:



ROUND ONE VOTING

The first round of voting occurred after completion of the independent review of the scenarios by the review panel and approval of the final indications, scenarios, and assumptions by the writing panel. The voting panel rated the scenarios electronically using a personalized ballot created by AAOS staff using the AAOS AUC Electronic Ballot Tool. There was no interaction between panel members while completing the first round of voting. Panelists considered the following materials:

- The instructions for rating appropriateness
- The completed literature review, that is appropriately referenced when evidence is available for a scenario
- The list of indications, definitions, and assumptions, to ensure consistency in the interpretation of the clinical scenarios

ROUND TWO VOTING

The second round of voting occurred after the in-person voting panel meeting on August 12th, 2014. Before the in-person meeting started, each panelist received a personalized document that included their first round ratings along with summarized results of the first-round ratings that resulted in disagreement. These results indicated the frequency of ratings for a scenario for all panelists. The document contained no identifying information for other panelists' ratings. The moderator also used a document that summarized the results of the panelists' first round voting. These personalized documents served as the basis for discussions of scenarios which resulted in disagreement.

During the discussion, the voting panel members were allowed to record a new rating for any scenarios if they were persuaded to do so by the discussion or the evidence. Additionally, voting panel members were allowed to submit any amended ratings (i.e. second round ratings) for one week after the in-person meeting. After the final ratings were submitted, AAOS staff used the AAOS AUC Electronic Ballot Tool to export the median values and level of agreement for all voting items. There was no attempt to obtain consensus among the panel members.

FINAL RATINGS

Using the median value of the second round ratings, AAOS staff determined the final levels of appropriateness. Disagreement among raters can affect the final rating. Agreement and disagreement were determined using the BIOMED definitions of Agreement and Disagreement, as reported in the RAND/UCLA Appropriate Method User's Manual ², for a panel of 14-16 voting members (see Table 2 below). For this panel size, disagreement is defined as when ≥ 5 members' appropriateness ratings fell within the appropriate (7-9) and rarely appropriate (1-3) ranges for any scenario (i.e. ≥ 5 members' ratings fell between 1-3 and ≥ 5 members' ratings fell between 7-9 on any given scenario and its treatment). If there is still disagreement in the voting panel ratings after the second round of voting, that voting item is labeled as "5" regardless of median score. Agreement is defined as ≤ 4 panelists rated outside of the 3-point range containing the median.

Table 2 Defining Agreement and Disagreement for Appropriateness Ratings

Panel Size	<u>Disagreement</u>	<u>Agreement</u>
	Number of panelists rating in each extreme (1-3 and 7-9)	Number of panelists rating outside the 3-point region containing the median (1-3, 4-6, 7-9)
8,9,10	≥ 3	≤ 2
11,12,13	≥ 4	≤ 3
14,15,16	≥ 5	≤ 4

Adapted from RAM¹

The classifications in the table below determined final levels of appropriateness.

Table 3 Interpreting Final Ratings of Criteria

Level of Appropriateness	Description
Appropriate	<ul style="list-style-type: none">• Median panel rating between 7-9 and no disagreement
May Be Appropriate	<ul style="list-style-type: none">• Median panel rating between 4-6 or• Median panel rating 1-9 with disagreement
Rarely Appropriate	<ul style="list-style-type: none">• Median panel rating between 1-3 and no disagreement

REVISION PLANS

These criteria represent a cross-sectional view of current use of treatments for pediatric supracondylar humerus fractures and may become outdated as new evidence becomes available or clinical decision making indicators are improved. In accordance with the standards of the National Guideline Clearinghouse, AAOS will update or withdraw these criteria in five years. AAOS will issue updates in accordance with new evidence, changing practice, rapidly emerging treatment options, and new technology.

DISSEMINATING APPROPRIATE USE CRITERIA

Publication of the Appropriate Use Criteria (AUC) document is on the AAOS website at [<http://www.aaos.org/auc>]. This document provides interested readers with full documentation about the development of Appropriate Use Criteria and further details of the criteria ratings.

AUCs are first announced by an Academy press release and then published on the AAOS website. AUC summaries are published in the *AAOS Now* and the *Journal of the American Academy of Orthopaedic Surgeons (JAAOS)*. In addition, the Academy's Annual Meeting showcases the AUCs on Academy Row and at Scientific Exhibits.

The dissemination efforts of AUC include web-based mobile applications, webinars, online modules for the Orthopaedic Knowledge Online website, radio media tours, and media briefings. In addition AUCs are also promoted in relevant Continuing Medical Education (CME) courses and distributed at the AAOS Resource Center.

Other dissemination efforts outside of the AAOS include submitting AUCs to the National Guideline Clearinghouse and to other medical specialty societies' meetings.

III. PATIENT INDICATIONS AND TREATMENTS

INDICATIONS

Table 4 Patient Indications and Classifications

Indication	Classification(s)
Fracture Type	<ul style="list-style-type: none"> a) Type 1 - nondisplaced b) Type 2 - extension type with cortical continuity of posterior cortex c) Type 2 - extension type with cortical continuity of posterior cortex with varus/valgus angulation d) Type 3 - extension type with no cortical continuity e) Transphyseal fracture f) Flexion type Fracture
Vascular Status (Pre-op assessment)	<ul style="list-style-type: none"> a) Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) <i>without</i> palpable distal pulse b) Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) <i>without</i> palpable distal pulse c) Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) <i>with</i> palpable distal pulse
Nerve Injuries	<ul style="list-style-type: none"> a) Associated nerve injury present b) Associated nerve injury absent
Soft Tissue Envelope	<ul style="list-style-type: none"> a) Open – Appears uncontaminated b) Open – Concern for contamination and/or significant soft tissue injury c) Closed
Ipsilateral Radius and/or Ulna Fracture	<ul style="list-style-type: none"> a) Typical b) Severe swelling, ecchymosis, and/or pucker sign (indentation of skin at the fracture site)

TREATMENTS

Treatments Addressed Within This AUC

- 1. Immobilization with cast or splint without reduction**
- 2. Reduction with subsequent casting at 70-90 degrees**
- 3. Reduction with subsequent casting at > 90 degrees**
- 4. Closed reduction with pinning and immobilization with lateral pinning**
 - Three Timing Options:
 - a. Emergent (ASAP, within medical status of patient and organization of staff)*
 - b. Urgent (patient is admitted as an inpatient admission, and admitted to the OR when medical status and staff are available)*
 - c. Outpatient*
- 5. Closed reduction with pinning and immobilization with cross pinning**
 - Three Timing Options:
 - a. Emergent (ASAP, within medical status of patient and organization of staff)*
 - b. Urgent (patient is admitted as an inpatient admission, and admitted to the OR when medical status and staff are available)*
 - c. Outpatient*
- 6. Open reduction and pinning and immobilization**
 - Three Timing Options:
 - a. Emergent (ASAP, within medical status of patient and organization of staff)*
 - b. Urgent (patient is admitted as an inpatient admission, and admitted to the OR when medical status and staff are available)*
 - c. Outpatient*
- 7. Traction**
- 8. External Fixation**

IV. RESULTS OF APPROPRIATENESS RATINGS

For a user-friendly version of these appropriate use criteria and the supporting literature review findings, please access our AUC web-based application at www.aaos.org/aucapp. To view the interactive literature review used for this AUC, please click the following link: [Interactive Literature Review](#).

Web-Based AUC Application Screenshot

Indication Profile	Procedure Recommendations
<p>Fracture Type i</p> <p><input type="radio"/> Type 1 - nondisplaced</p> <p><input type="radio"/> Type 2 - extension type with cortical continuity of posterior cortex</p> <p><input type="radio"/> Type 2 - extension type with cortical continuity of posterior cortex with varus/valgus angulation</p> <p><input checked="" type="radio"/> Type 3 - extension type with no cortical continuity</p> <p><input type="radio"/> Transphyseal fracture</p> <p><input type="radio"/> Flexion Type Fracture</p>	<p>Click Procedure of Interest to View Interactive Literature Review</p>
<p>Vascular Status (Pre-op assessment)</p> <p><input type="radio"/> Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse</p> <p><input type="radio"/> Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse</p> <p><input checked="" type="radio"/> Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse</p>	<p>✔ Emergent - Closed reduction with pinning and immobilization with lateral pinning 7</p> <p>✔ Emergent - Closed reduction with pinning and immobilization with cross pinning 7</p> <p>✔ Emergent - Open reduction and pinning and immobilization 7</p> <p>! Urgent - Closed reduction with pinning and immobilization with lateral pinning 6</p> <p>! Urgent - Closed reduction with pinning and immobilization with cross pinning 6</p> <p>! Urgent - Open reduction and pinning and immobilization 6</p> <p>✘ Immobilization with cast or splint without reduction 1</p> <p>✘ Reduction with subsequent casting at 70-90 degrees 1</p> <p>✘ Reduction with subsequent casting at > 90 degrees 1</p> <p>✘ Outpatient - Closed reduction with pinning and immobilization with lateral pinning 1</p> <p>✘ Outpatient - Closed reduction with pinning and immobilization with cross pinning 1</p> <p>✘ Outpatient - Open reduction and pinning and immobilization 1</p> <p>✘ Traction 1</p> <p>✘ External Fixation 2</p>
<p>Nerve Injuries</p> <p><input type="radio"/> Associated nerve injury present</p> <p><input checked="" type="radio"/> Associated nerve injury absent</p>	
<p>Soft Tissue Envelope</p> <p><input checked="" type="radio"/> Open soft tissue envelope - Appears uncontaminated</p> <p><input type="radio"/> Open soft tissue envelope - Concern for contamination and/or significant soft tissue injury</p> <p><input type="radio"/> Closed soft tissue envelope</p>	
<p>Ipsilateral radius and/or ulna fracture</p> <p><input checked="" type="radio"/> Ipsilateral radius and/or ulna fracture present</p> <p><input type="radio"/> Ipsilateral radius and/or ulna fracture absent</p>	
<p>Degree of Swelling</p> <p><input checked="" type="radio"/> Typical swelling</p> <p><input type="radio"/> Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site</p>	
<p>Submit ➔</p>	

[Click Here to Access the AUC App!](#)

Results

The following Appropriate Use Criteria tables contain the final appropriateness ratings assigned by the sixteen members of the voting panel. Patient characteristics are found under the column titled “Scenario”. The Appropriate Use Criteria for each patient scenario can be found within each of the 10 treatment rows. These criteria are formatted by appropriateness labels (i.e. “R”=Rarely Appropriate, “M”=May Be Appropriate, and “A”=Appropriate), median rating, and + or - indicating agreement or disagreement amongst the voting panel, respectively.

Out of 3080 total voting items (i.e. 220 patient scenarios x 14 treatments), 678 (22%) voting items were rated as “Appropriate”, 431 (14%) voting items were rated as “May Be Appropriate”, and 1971 (64%) voting items were rated as “Rarely Appropriate” (Figure 1). Additionally, the voting panel members were in agreement on 2125 (69%) voting items and were in disagreement on 5 (0.16%) voting items (Figure 2). For a within treatment breakdown of appropriateness ratings, please refer to Figure 3.

Figure 1. Breakdown of Appropriateness Ratings

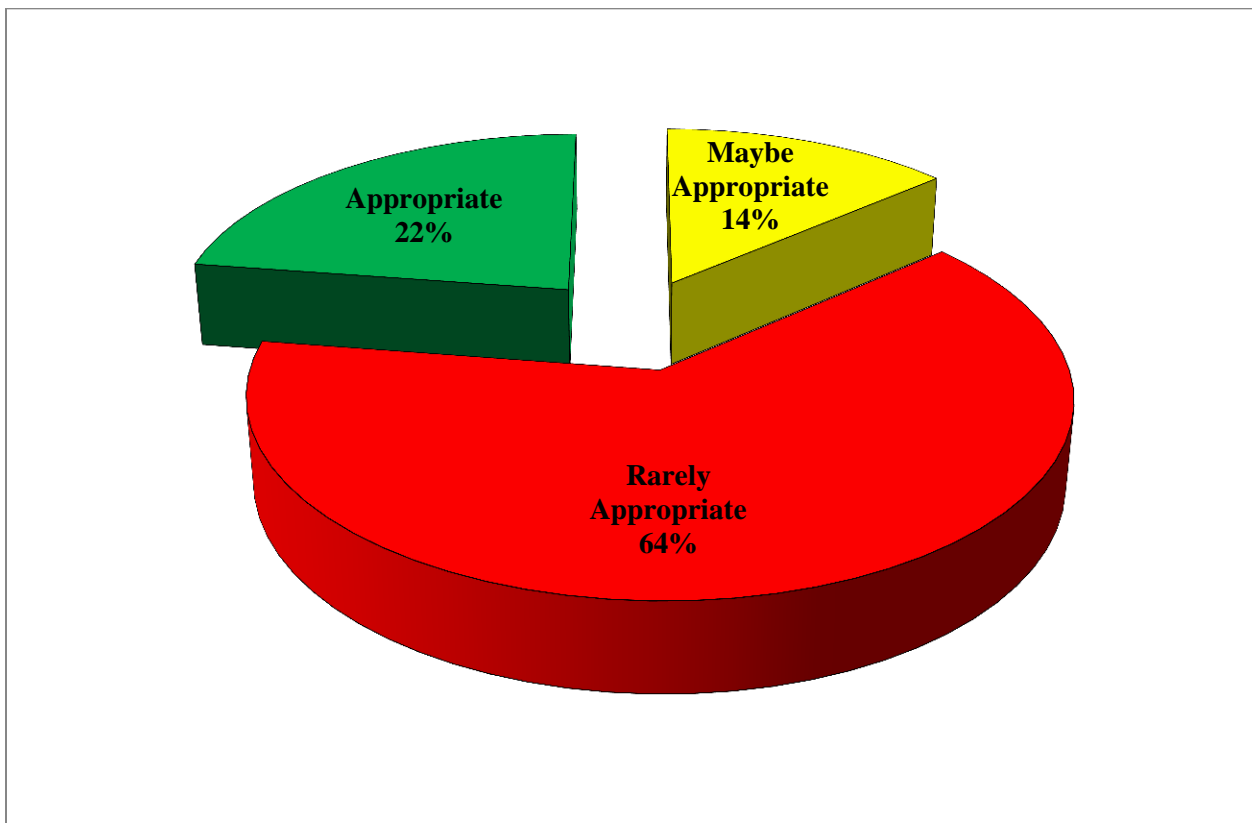


Figure 2. Breakdown of Agreement amongst Voting Panel

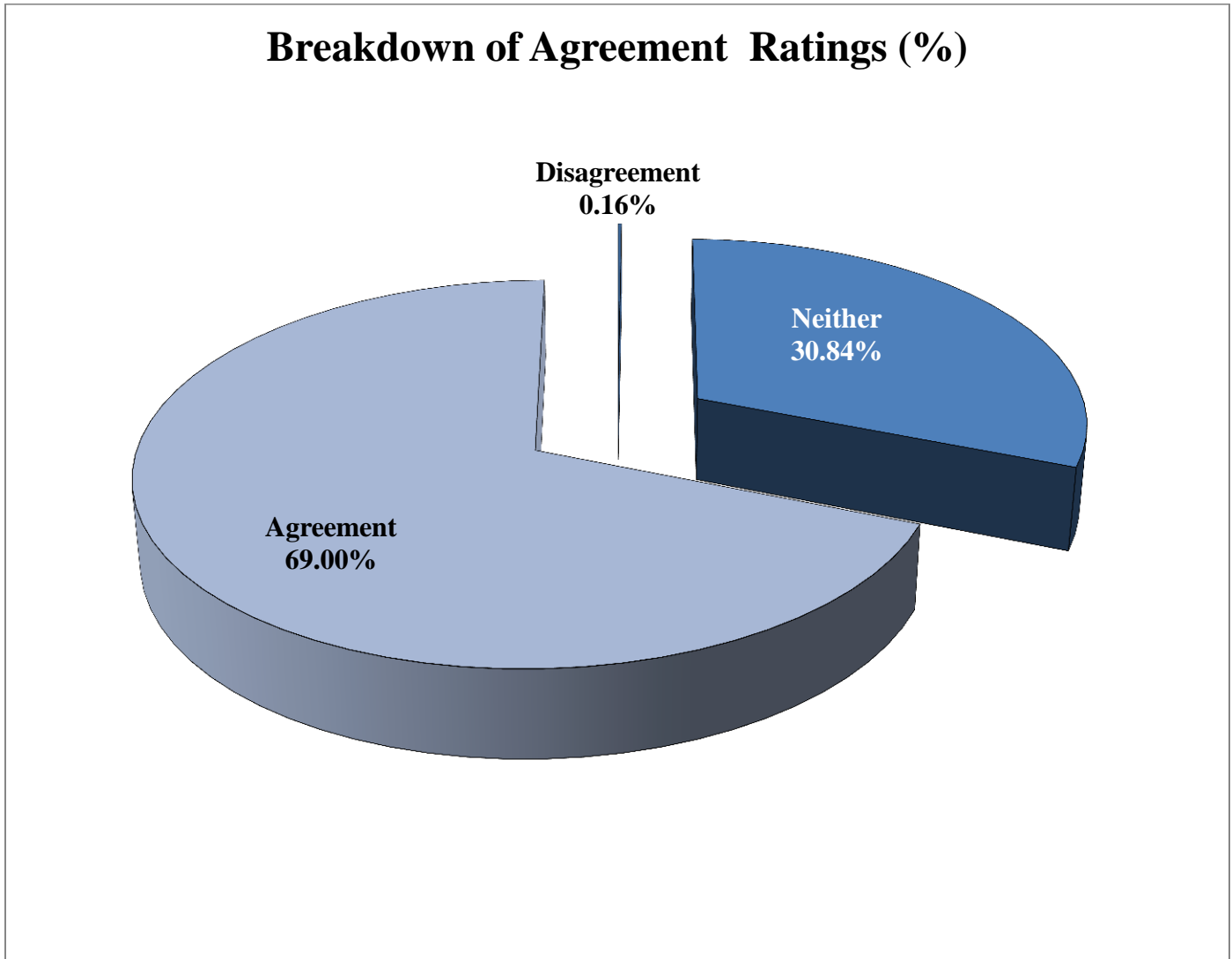


Figure 3. Distribution of Appropriateness Ratings on 9-Point Rating Scale

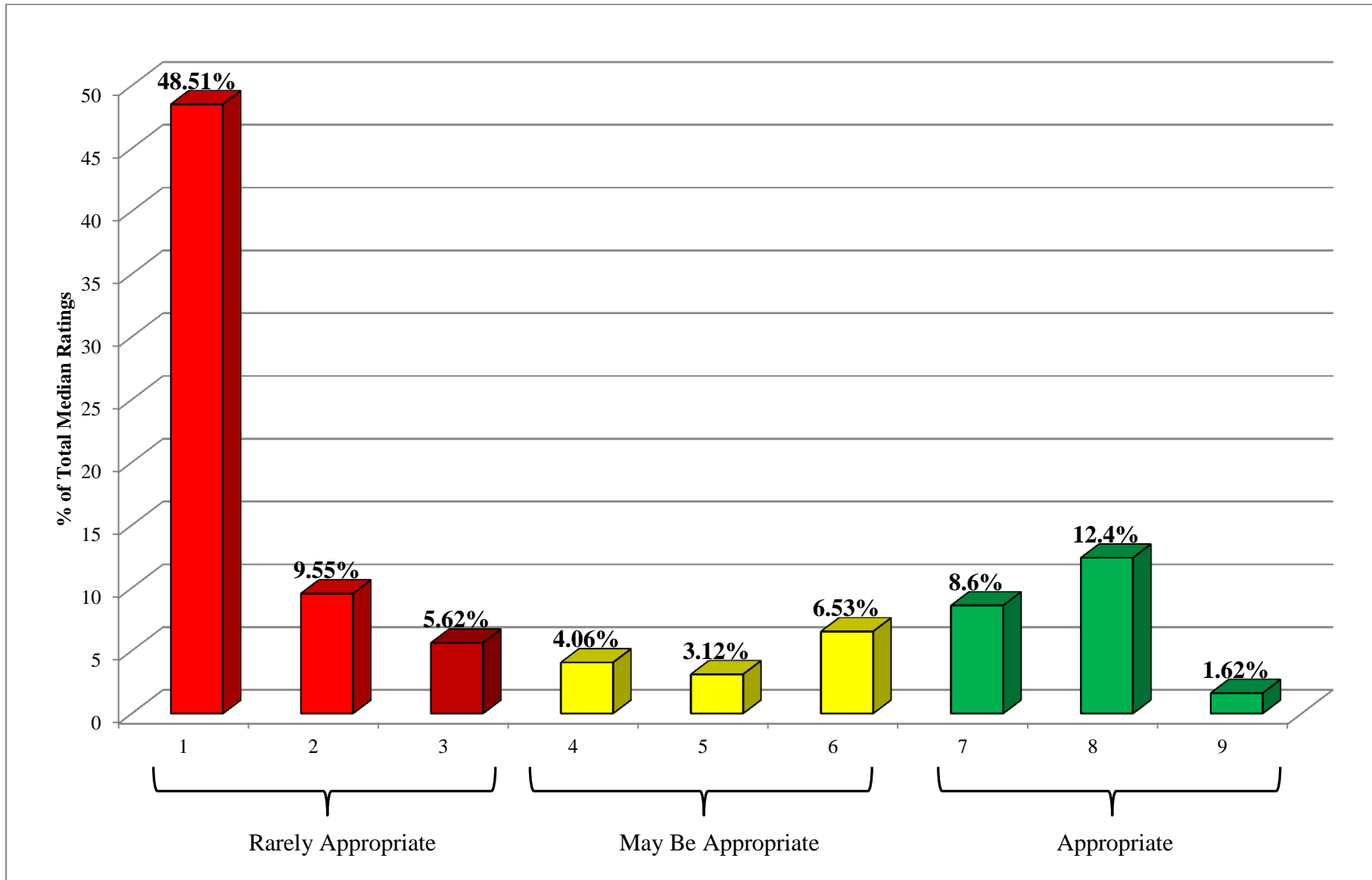


Figure 4. Within Treatment Appropriateness Ratings

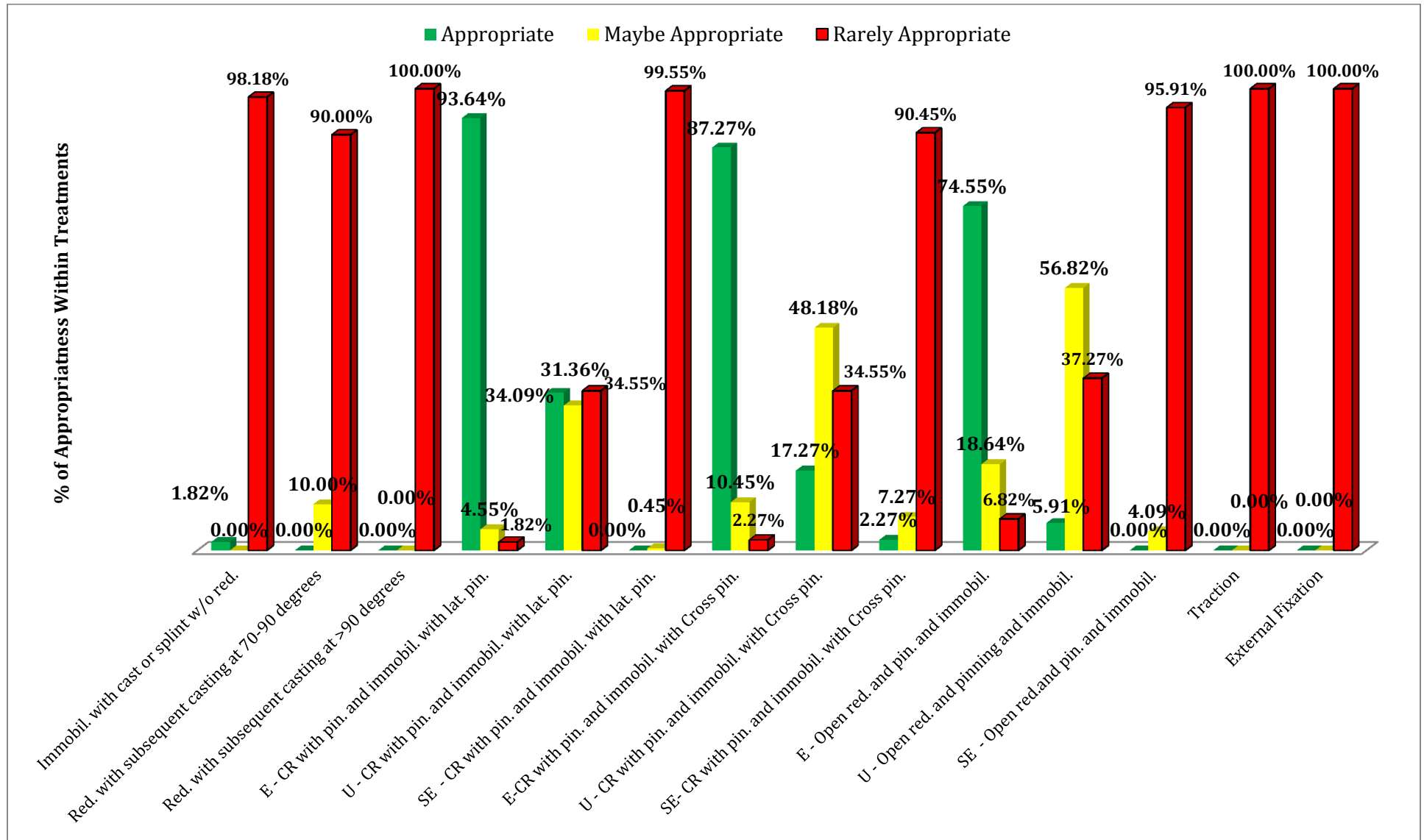
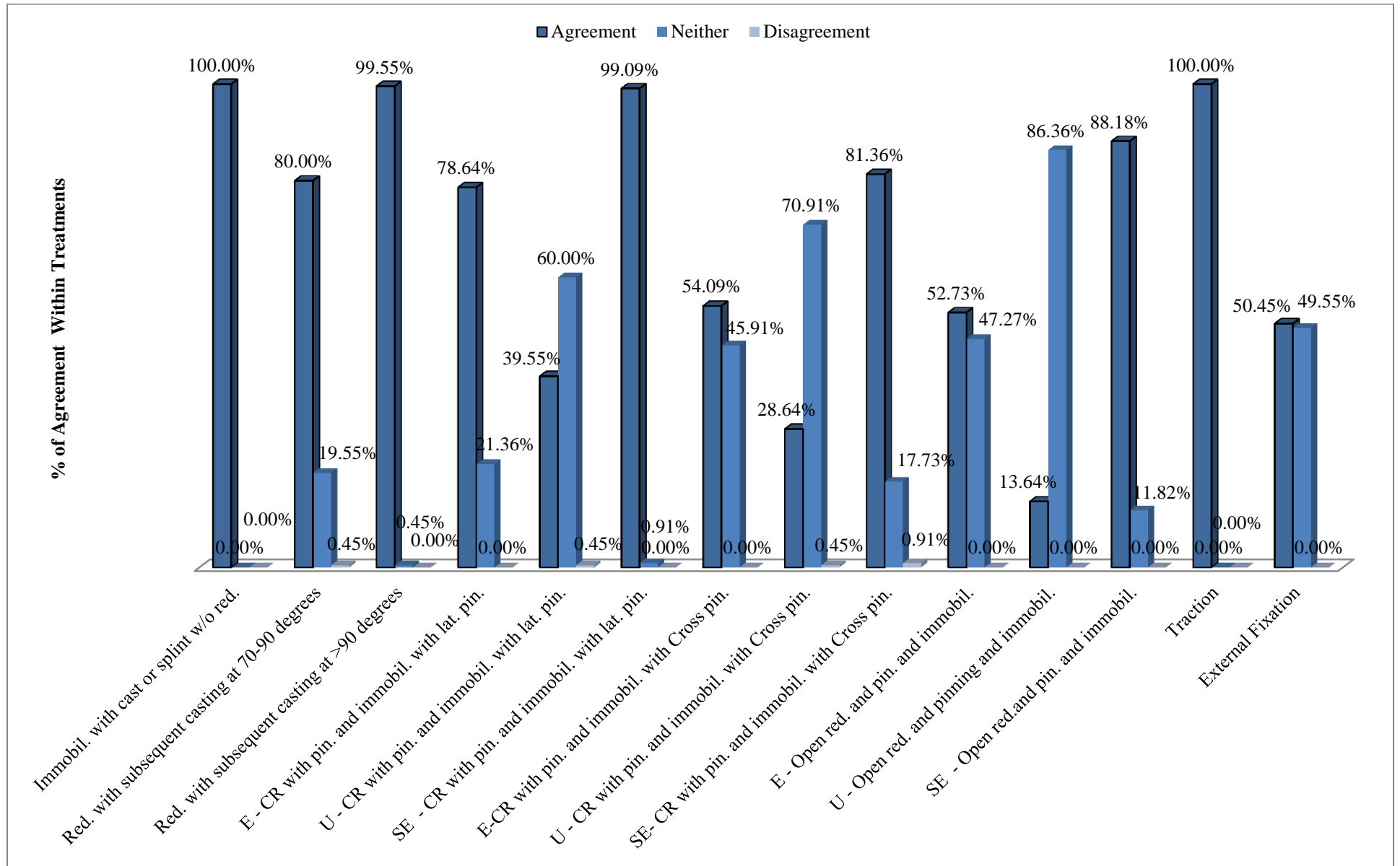


Figure 5. Within Treatment Agreement between Voting Panel Members



APPROPRIATE USE CRITERIA FOR MANAGEMENT OF PEDIATRIC SUPRACONDYLAR HUMERUS FRACTURES

Interpreting the AUC tables:

- R = Rarely Appropriate, M = May Be Appropriate, A = Appropriate
- Numbers under “Median” column indicate the median rating of voting panel
- A plus symbol (+) indicates agreement between voting panel members and a minus symbol (-) indicates disagreement between voting panel members

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
1	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	A	9	+
1	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	
1	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
1	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
1	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
1	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
1	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	R	1	+
1	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	1	+
1	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
1	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	R	1	+
1	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	1	+
1	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
1	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
1	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	+
2	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	A	9	+
2	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
2	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
2	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
2	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
2	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
2	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	R	1	+
2	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	1	+
2	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
2	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	R	1	+
2	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	1	+
2	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
2	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
2	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
3	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft	Immobilization with cast or splint without reduction	A	9	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	tissue envelope, No Ipsilateral Fracture, Typical swelling				
3	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
3	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
3	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
3	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
3	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
3	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	R	1	+
3	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	tissue envelope, No Ipsilateral Fracture, Typical swelling				
3	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
3	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	R	1	+
3	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	1	+
3	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
3	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
3	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
4	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	A	9	+
4	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
4	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
4	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
4	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
4	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
4	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	R	1	+
4	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	1	+
4	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
4	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
4	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	1	+
4	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
4	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
4	Type1-nondisplaced, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
5	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
5	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	envelope, Ipsilateral Fracture Present, Typical swelling				
5	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
5	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	9	+
5	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
5	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
5	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
5	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
5	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
5	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
5	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	2	+
5	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
5	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
5	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	+
6	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
6	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
6	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
6	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	9	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
6	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
6	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
6	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	+
6	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
6	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	fracture site				
6	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
6	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	2	
6	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
6	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
6	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
7	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
7	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
7	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
7	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	9	+
7	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
7	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
7	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
7	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
7	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
7	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
7	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
7	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
7	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
7	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	+
8	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
8	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
8	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
8	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	9	+
8	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
8	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
8	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	fracture site				
8	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
8	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
8	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
8	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	2	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
8	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
8	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
8	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
9	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
9	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
9	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Fracture Present, Typical swelling				
9	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
9	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
9	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
9	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
9	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
9	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
9	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,	Emergent - Open reduction and pinning and immobilization	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling				
9	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	2	+
9	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
9	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
9	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	+
10	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
10	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
10	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
10	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
10	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
10	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
10	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
10	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
10	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
10	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	
10	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	3	
10	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
10	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
10	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
11	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
11	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
11	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
11	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
11	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling				
11	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
11	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
11	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
11	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
11	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	
11	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	2	+
11	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling				
11	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
11	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	+
12	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
12	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
12	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
12	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
12	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
12	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
12	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
12	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
12	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
12	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	
12	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	2	
12	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
12	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
12	Type2-w/o angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
13	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
13	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	2	+
13	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
13	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
13	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
13	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	3	+
13	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
13	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
13	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	3	
13	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	M	4	
13	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	4	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
13	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	3	+
13	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
13	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	+
14	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
14	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
14	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
14	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	9	+
14	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
14	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	3	+
14	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	site				
14	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
14	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	3	+
14	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	M	5	
14	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	4	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
14	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	2	+
14	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
14	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
15	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
15	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
15	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
15	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
15	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
15	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	3	
15	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
15	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
15	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	3	
15	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	M	4	
15	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	4	
15	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	3	+
15	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
15	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
16	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
16	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
16	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
16	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
16	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	site				
16	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	3	
16	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	M	6	
16	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
16	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	3	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
16	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	M	5	
16	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	4	
16	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	2	+
16	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
16	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	site				
17	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
17	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
17	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
17	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	+
17	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
17	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	3	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
17	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
17	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
17	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	3	
17	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	R	3	
17	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	4	
17	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	3	+
17	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
17	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	+
18	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
18	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
18	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
18	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
18	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling,	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	ecchymosis, and/or pucker sign indentation of skin at the fracture site				
18	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	3	
18	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	M	6	
18	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
18	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	3	
18	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign	Emergent - Open reduction and pinning and immobilization	M	5	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	indentation of skin at the fracture site				
18	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	4	
18	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	3	+
18	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
18	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
19	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
19	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
19	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
19	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	+
19	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
19	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	M	4	
19	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	M	6	
19	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
19	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	M	4	
19	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	R	3	
19	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	4	
19	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	3	+
19	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
19	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	+
20	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
20	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
20	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
20	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
20	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
20	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
20	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	M	6	
20	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	+
20	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	3	
20	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	M	5	
20	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	4	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
20	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	2	+
20	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
20	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
21	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
21	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	2	+
21	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
21	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	+
21	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
21	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	M	4	
21	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	M	5	
21	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	+
21	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	M	4	
21	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
21	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	3	
21	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	2	+
21	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
21	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	+
22	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
22	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
22	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
22	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	+
22	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
22	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	3	
22	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
22	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
22	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	3	
22	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	R	3	
22	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	3	
22	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
22	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
22	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
23	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
23	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	2	+
23	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	2	+
23	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
23	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling				
23	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	M	5	-
23	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	M	4	
23	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
23	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	M	4	
23	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	R	3	
23	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	3	
23	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,	Outpatient - Open reduction and pinning and immobilization	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling				
23	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
23	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	+
24	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
24	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
24	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
24	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
24	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	8	
24	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	M	5	
24	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	M	5	
24	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
24	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	M	4	
24	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	M	4	
24	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	4	
24	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	3	+
24	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
24	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
25	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
25	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	3	+
25	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
25	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	M	4	
25	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
25	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
25	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	M	4	
25	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
25	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	M	4	
25	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	R	3	+
25	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	3	
25	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	3	
25	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
25	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	+
26	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
26	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
26	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
26	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
26	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis,	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	and/or pucker sign indentation of skin at the fracture site				
26	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	M	4	
26	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	M	5	
26	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
26	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	M	4	
26	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Emergent - Open reduction and pinning and immobilization	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
26	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	3	
26	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
26	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
26	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
27	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
27	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	M	4	
27	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	3	
27	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	M	4	
27	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
27	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
27	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	R	3	
27	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	5	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
27	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	M	5	
27	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	R	3	+
27	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	3	+
27	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	3	
27	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
27	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	+
28	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
28	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
28	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
28	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
28	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
28	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
28	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	M	4	
28	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	5	
28	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	M	4	
28	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	R	3	
28	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
28	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	2	+
28	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
28	Type2-w/o angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
29	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
29	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
29	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present,	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Typical swelling				
29	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	9	+
29	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
29	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
29	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	
29	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
29	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
29	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	9	
29	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	2	+
29	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
29	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
29	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
30	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
30	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
30	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
30	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	9	+
30	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	fracture site				
30	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
30	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
30	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
30	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
30	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	9	
30	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	2	
30	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
30	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
30	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the	External Fixation	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	fracture site				
31	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
31	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
31	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
31	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	9	+
31	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
31	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
31	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	
31	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
31	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
31	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	9	
31	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
31	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
31	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
31	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	+
32	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
32	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
32	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
32	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	9	+
32	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
32	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
32	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	fracture site				
32	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
32	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
32	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	9	
32	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	2	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
32	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
32	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
32	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
33	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
33	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
33	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Fracture Present, Typical swelling				
33	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	9	+
33	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
33	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
33	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	
33	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
33	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
33	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,	Emergent - Open reduction and pinning and immobilization	A	9	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling				
33	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	2	+
33	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
33	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
33	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	+
34	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
34	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
34	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
34	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	9	+
34	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
34	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
34	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
34	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
34	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
34	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	9	
34	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	2	
34	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
34	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
34	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
35	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
35	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
35	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
35	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	9	+
35	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling				
35	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
35	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	
35	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	3	+
35	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
35	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	9	
35	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	2	+
35	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling				
35	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
35	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	+
36	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
36	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
36	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
36	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	9	+
36	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
36	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
36	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	
36	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
36	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
36	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	9	
36	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	2	
36	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
36	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
36	Type2- w/ angulation, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
37	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
37	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
37	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
37	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
37	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
37	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
37	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
37	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
37	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
37	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	M	5	
37	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	4	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
37	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
37	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
37	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	+
38	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
38	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
38	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
38	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
38	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
38	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
38	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	site				
38	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
38	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	2	+
38	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	M	5	
38	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
38	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
38	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
38	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
39	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
39	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
39	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
39	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
39	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	+
39	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
39	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
39	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
39	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	2	+
39	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	M	5	
39	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	4	
39	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	2	+
39	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
39	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
40	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
40	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
40	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
40	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
40	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	site				
40	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	3	+
40	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
40	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
40	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	3	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
40	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	M	5	
40	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	4	
40	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
40	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
40	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	site				
41	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
41	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
41	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
41	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
41	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	+
41	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	2	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
41	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
41	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	
41	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	2	
41	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	M	5	
41	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	4	
41	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
41	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
41	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	+
42	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
42	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
42	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
42	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	9	+
42	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling,	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	ecchymosis, and/or pucker sign indentation of skin at the fracture site				
42	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	2	
42	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
42	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	
42	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	2	
42	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign	Emergent - Open reduction and pinning and immobilization	M	5	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	indentation of skin at the fracture site				
42	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	
42	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
42	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
42	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
43	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
43	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
43	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
43	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
43	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	+
43	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	2	
43	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
43	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
43	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	2	
43	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	M	5	
43	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	4	
43	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
43	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
43	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	+
44	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
44	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
44	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
44	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
44	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	+
44	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	2	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
44	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
44	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	
44	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	2	
44	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	M	5	
44	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
44	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
44	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
44	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
45	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
45	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
45	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
45	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
45	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	+
45	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	3	
45	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	M	6	
45	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	
45	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	3	
45	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	M	4	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
45	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	5	
45	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	3	
45	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
45	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	+
46	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
46	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
46	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
46	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
46	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
46	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	3	+
46	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
46	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
46	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	3	
46	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	M	5	
46	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	
46	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
46	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
46	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
47	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
47	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
47	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
47	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
47	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling				
47	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	M	5	
47	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	M	6	
47	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
47	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	M	4	
47	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	R	3	
47	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	4	
47	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,	Outpatient - Open reduction and pinning and immobilization	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling				
47	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
47	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	+
48	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
48	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
48	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
48	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	
48	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
48	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
48	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	M	6	
48	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
48	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	3	
48	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	M	4	
48	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	4	
48	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	2	+
48	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
48	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
49	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
49	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
49	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
49	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
49	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
49	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
49	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	M	6	
49	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	
49	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	M	5	
49	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	R	3	
49	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	4	
49	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	3	
49	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
49	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	+
50	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
50	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
50	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
50	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
50	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis,	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	and/or pucker sign indentation of skin at the fracture site				
50	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	3	
50	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	M	6	
50	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	
50	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	3	
50	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Emergent - Open reduction and pinning and immobilization	M	4	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
50	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	4	
50	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	2	+
50	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
50	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
51	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
51	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
51	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
51	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
51	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
51	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	A	7	
51	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	M	6	
51	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
51	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	M	6	
51	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	M	4	
51	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	5	
51	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	3	
51	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
51	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	+
52	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
52	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
52	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
52	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
52	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	+
52	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	M	5	-

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
52	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	M	6	
52	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
52	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	M	5	-
52	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	M	4	
52	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	4	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
52	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	3	+
52	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
52	Type2- w/ angulation, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
53	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
53	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
53	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Present, Typical swelling				
53	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
53	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	3	+
53	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
53	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
53	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	3	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
53	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
53	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
53	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	3	
53	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
53	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
53	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
54	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
54	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
54	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
54	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
54	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
54	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
54	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
54	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	3	
54	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
54	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
54	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	4	
54	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
54	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
54	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	External Fixation	R	1	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
55	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
55	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
55	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
55	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
55	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
55	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
55	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
55	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	3	
55	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
55	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	9	+
55	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
55	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
55	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
55	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	
56	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
56	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
56	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
56	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
56	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
56	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
56	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
56	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
56	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
56	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	9	+
56	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
56	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
56	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
56	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
57	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
57	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
57	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
57	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
57	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
57	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
57	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
57	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
57	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
57	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	9	+
57	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	3	
57	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
57	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
57	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	2	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
58	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
58	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
58	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
58	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
58	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
58	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
58	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
58	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
58	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
58	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	9	+
58	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	3	
58	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
58	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
58	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	External Fixation	R	2	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
59	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
59	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
59	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
59	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
59	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
59	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
59	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
59	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
59	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
59	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	9	+
59	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
59	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
59	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
59	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, No Ipsilateral Fracture, Typical swelling	External Fixation	R	2	
60	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
60	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
60	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
60	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
60	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
60	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
60	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	fracture site				
60	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
60	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
60	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	9	+
60	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	2	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
60	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
60	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
60	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
61	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
61	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
61	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
61	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	9	+
61	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	3	+
61	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
61	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
61	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	3	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
61	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
61	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
61	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	3	
61	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
61	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
61	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
62	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
62	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
62	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
62	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	9	+
62	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	3	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	indentation of skin at the fracture site				
62	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
62	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
62	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	3	+
62	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
62	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
62	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	3	
62	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
62	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
62	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	indentation of skin at the fracture site				
63	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
63	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
63	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
63	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	9	+
63	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	3	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
63	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
63	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
63	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	3	+
63	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
63	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
63	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
63	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
63	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
63	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	+
64	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
64	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
64	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
64	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
64	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	3	
64	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
64	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	indentation of skin at the fracture site				
64	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	3	
64	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
64	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
64	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
64	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
64	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
64	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
65	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
65	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
65	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
65	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
65	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	
65	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
65	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
65	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
65	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
65	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
65	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	3	
65	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
65	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
65	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	2	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
66	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
66	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
66	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
66	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
66	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	site				
66	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
66	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
66	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	
66	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
66	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
66	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	3	
66	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
66	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
66	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	site				
67	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
67	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
67	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
67	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
67	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
67	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
67	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
67	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
67	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
67	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
67	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	3	
67	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
67	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
67	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	External Fixation	R	2	
68	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
68	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
68	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
68	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
68	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling,	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	ecchymosis, and/or pucker sign indentation of skin at the fracture site				
68	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
68	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
68	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
68	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
68	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	indentation of skin at the fracture site				
68	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	3	
68	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
68	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
68	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
69	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
69	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
69	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
69	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
69	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
69	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
69	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
69	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
69	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
69	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	9	+
69	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	2	
69	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
69	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
69	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	2	
70	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
70	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
70	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
70	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
70	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
70	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
70	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
70	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
70	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
70	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	9	+
70	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
70	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
70	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
70	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
71	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
71	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
71	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
71	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
71	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
71	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
71	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
71	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
71	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
71	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	9	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
71	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	3	
71	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
71	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
71	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	External Fixation	R	2	
72	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
72	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
72	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
72	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
72	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
72	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
72	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
72	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
72	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
72	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	9	+
72	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	3	
72	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
72	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
72	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
73	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
73	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
73	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
73	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	9	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
73	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	3	+
73	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
73	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
73	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	3	+
73	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
73	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
73	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	3	
73	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
73	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
73	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	+
74	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
74	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	sign indentation of skin at the fracture site				
74	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
74	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
74	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	3	+
74	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
74	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
74	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	3	+
74	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
74	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
74	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	site				
74	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
74	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
74	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
75	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
75	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Ipsilateral Fracture, Typical swelling				
75	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
75	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	9	+
75	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	3	+
75	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
75	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
75	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	3	+
75	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling				
75	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
75	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	3	
75	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
75	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
75	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	+
76	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
76	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
76	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
76	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
76	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	3	+
76	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
76	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
76	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	3	+
76	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
76	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
76	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
76	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
76	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
76	Type3 Fracture- No continuity, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
77	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
77	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
77	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, Ipsilateral Fracture	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Present, Typical swelling				
77	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	+
77	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
77	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
77	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	+
77	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
77	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
77	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	
77	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	
77	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
77	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
77	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	2	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
78	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
78	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
78	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
78	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
78	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
78	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
78	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
78	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
78	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
78	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
78	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	6	
78	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
78	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
78	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	External Fixation	R	2	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
79	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
79	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
79	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
79	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	+
79	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
79	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
79	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	+
79	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
79	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
79	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	7	+
79	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
79	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
79	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
79	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	External Fixation	R	2	
80	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
80	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
80	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
80	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
80	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
80	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
80	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
80	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
80	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
80	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
80	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
80	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
80	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
80	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
81	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
81	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
81	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
81	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	
81	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	5	
81	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
81	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	
81	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	5	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
81	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
81	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
81	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	+
81	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
81	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
81	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	2	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
82	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
82	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
82	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
82	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
82	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	4	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
82	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
82	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
82	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	4	
82	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
82	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
82	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	6	
82	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
82	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
82	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	External Fixation	R	2	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
83	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
83	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
83	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
83	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
83	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	4	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
83	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
83	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
83	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	4	
83	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
83	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
83	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
83	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
83	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
83	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	External Fixation	R	2	
84	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
84	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
84	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site				
84	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
84	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	4	
84	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
84	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
84	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	4	
84	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
84	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
84	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	6	
84	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	fracture site				
84	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
84	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
85	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
85	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
85	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
85	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	
85	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
85	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
85	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
85	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
85	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
85	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	7	
85	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	
85	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
85	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
85	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	+
86	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
86	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
86	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
86	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
86	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	5	
86	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	indentation of skin at the fracture site				
86	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
86	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	5	
86	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
86	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
86	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	6	
86	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
86	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
86	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
87	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
87	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
87	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
87	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
87	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
87	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
87	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
87	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
87	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
87	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	7	
87	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	
87	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
87	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
87	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	+
88	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
88	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
88	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
88	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
88	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	5	
88	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
88	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
88	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	5	
88	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	indentation of skin at the fracture site				
88	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	7	
88	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	6	
88	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
88	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
88	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
89	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
89	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
89	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
89	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
89	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
89	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
89	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
89	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
89	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
89	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
89	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
89	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
89	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
89	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	2	
90	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
90	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
90	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated,	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site				
90	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
90	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
90	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
90	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
90	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
90	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
90	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
90	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	6	+
90	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	site				
90	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
90	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
91	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
91	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
91	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
91	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	+
91	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
91	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
91	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	+
91	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
91	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
91	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
91	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	
91	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
91	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
91	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	External Fixation	R	2	
92	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
92	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
92	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
92	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
92	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
92	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
92	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
92	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
92	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
92	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
92	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	6	
92	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
92	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
92	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
93	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
93	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
93	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
93	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
93	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling				
93	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
93	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
93	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	+
93	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
93	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
93	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	+
93	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling				
93	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
93	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	2	
94	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
94	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
94	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
94	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
94	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	4	
94	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
94	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
94	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	4	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
94	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
94	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
94	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	
94	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
94	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
94	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
95	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
95	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
95	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
95	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
95	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	4	
95	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
95	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
95	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	4	
95	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
95	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
95	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	
95	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
95	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
95	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	External Fixation	R	2	
96	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
96	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
96	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
96	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
96	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling,	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	4	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	ecchymosis, and/or pucker sign indentation of skin at the fracture site				
96	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
96	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
96	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	4	
96	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
96	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign	Emergent - Open reduction and pinning and immobilization	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	indentation of skin at the fracture site				
96	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	
96	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
96	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
96	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
97	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
97	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
97	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
97	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
97	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
97	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
97	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
97	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	
97	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
97	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	7	
97	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	
97	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
97	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
97	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	+
98	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
98	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
98	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
98	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
98	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
98	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
98	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
98	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
98	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	site				
98	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	7	
98	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	
98	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
98	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
98	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
99	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
99	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
99	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
99	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
99	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
99	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Ipsilateral Fracture, Typical swelling				
99	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
99	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
99	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	2	+
99	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	7	+
99	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	
99	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
99	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling				
99	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	+
100	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
100	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
100	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
100	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
100	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	5	
100	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
100	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
100	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	5	
100	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
100	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	7	
100	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	6	
100	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
100	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
100	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
101	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
101	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
101	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
101	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	+
101	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
101	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
101	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	+
101	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	
101	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
101	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	7	
101	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	A	7	
101	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
101	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
101	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	2	
102	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
102	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
102	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
102	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	
102	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
102	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
102	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	
102	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
102	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
102	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	
102	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	6	
102	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
102	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
102	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
103	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
103	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
103	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
103	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Contaminated, No Ipsilateral Fracture, Typical swelling				
103	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un- Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
103	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un- Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
103	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un- Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
103	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un- Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	
103	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un- Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
103	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	7	
103	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	
103	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
103	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
103	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	External Fixation	R	2	
104	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
104	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
104	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
104	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	
104	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
104	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	fracture site				
104	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	
104	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
104	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
104	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
104	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	6	
104	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
104	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
104	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
105	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
105	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
105	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
105	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
105	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	5	
105	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
105	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
105	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	5	
105	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
105	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
105	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	
105	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
105	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
105	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	2	
106	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
106	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
106	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
106	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
106	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	4	
106	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
106	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
106	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	4	
106	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	site				
106	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
106	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	
106	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
106	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
106	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	3	
107	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
107	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
107	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
107	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
107	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	5	
107	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, No	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Ipsilateral Fracture, Typical swelling				
107	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	+
107	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	5	
107	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
107	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
107	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	
107	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
107	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
107	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	External Fixation	R	3	
108	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
108	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
108	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
108	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
108	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	4	
108	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
108	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
108	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	4	
108	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
108	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
108	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	6	
108	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
108	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
108	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
109	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
109	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
109	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
109	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
109	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	8	
109	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
109	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
109	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	
109	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	3	
109	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	M	6	
109	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	5	
109	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
109	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
109	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	+
110	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
110	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
110	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
110	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	
110	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
110	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	3	+
110	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
110	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	fracture site				
110	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	3	+
110	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	M	6	
110	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	
110	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
110	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	2	+
110	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
111	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
111	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
111	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
111	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	envelope, No Ipsilateral Fracture, Typical swelling				
111	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
111	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	3	
111	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	M	6	
111	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	
111	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
111	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	M	6	
111	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	5	
111	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	3	
111	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
111	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	+
112	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
112	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
112	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
112	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
112	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
112	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	3	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	fracture site				
112	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
112	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	
112	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	3	+
112	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
112	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	
112	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	3	
112	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
112	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
113	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
113	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
113	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
113	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
113	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
113	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
113	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
113	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
113	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
113	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	7	
113	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	
113	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
113	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
113	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	2	
114	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
114	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
114	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
114	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
114	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
114	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
114	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
114	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
114	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	site				
114	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
114	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	A	7	
114	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
114	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
114	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
115	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
115	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
115	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
115	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
115	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
115	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Ipsilateral Fracture, Typical swelling				
115	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
115	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
115	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
115	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	7	
115	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	A	7	
115	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
115	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling				
115	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	External Fixation	R	2	
116	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
116	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
116	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
116	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
116	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
116	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
116	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
116	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
116	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
116	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
116	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	A	7	
116	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
116	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
116	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	3	
117	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling				
117	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
117	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
117	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
117	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	5	
117	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
117	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	+
117	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	5	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling				
117	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
117	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
117	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	
117	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
117	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
117	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	2	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
118	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
118	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
118	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
118	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
118	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	4	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
118	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
118	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
118	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	4	
118	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
118	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
118	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	
118	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
118	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
118	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
119	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
119	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
119	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
119	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
119	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	5	
119	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
119	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	+
119	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	5	+
119	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
119	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
119	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	+
119	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
119	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
119	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	External Fixation	R	2	
120	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
120	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling,	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	ecchymosis, and/or pucker sign indentation of skin at the fracture site				
120	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
120	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
120	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	4	
120	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
120	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	indentation of skin at the fracture site				
120	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	4	
120	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
120	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
120	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	
120	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	indentation of skin at the fracture site				
120	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
120	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
121	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
121	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
121	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
121	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral	Emergent - Closed reduction with pinning and immobilization with lateral pinning	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Fracture Present, Typical swelling				
121	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
121	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	3	
121	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	M	6	
121	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	
121	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	3	
121	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	M	6	
121	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,	Urgent - Open reduction and pinning and immobilization	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling				
121	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	3	
121	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
121	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	+
122	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
122	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
122	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling,	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	ecchymosis, and/or pucker sign indentation of skin at the fracture site				
122	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
122	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
122	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
122	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	+
122	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	indentation of skin at the fracture site				
122	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	2	+
122	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	7	
122	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	6	
122	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	2	+
122	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	indentation of skin at the fracture site				
122	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
123	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
123	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
123	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
123	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
123	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
123	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	3	
123	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	M	6	
123	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	
123	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	3	
123	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	M	6	
123	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	5	
123	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
123	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
123	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	+
124	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
124	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
124	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
124	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
124	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
124	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
124	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	M	6	
124	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	
124	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
124	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	7	
124	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	6	
124	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	2	+
124	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
124	Type3 Fracture- No continuity, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
125	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling				
125	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
125	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
125	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
125	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
125	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
125	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
125	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling				
125	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
125	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
125	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	2	
125	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
125	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
125	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
126	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
126	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
126	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
126	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
126	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
126	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
126	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
126	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
126	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
126	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
126	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	2	
126	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
126	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
126	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
127	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
127	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
127	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
127	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
127	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
127	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
127	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
127	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
127	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
127	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	9	+
127	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	2	
127	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
127	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
127	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	+
128	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
128	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling,	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	ecchymosis, and/or pucker sign indentation of skin at the fracture site				
128	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
128	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
128	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
128	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
128	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	indentation of skin at the fracture site				
128	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
128	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
128	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
128	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	2	
128	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	indentation of skin at the fracture site				
128	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
128	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
129	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
129	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
129	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
129	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Present, Typical swelling				
129	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
129	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
129	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
129	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
129	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
129	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
129	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft	Urgent - Open reduction and pinning and immobilization	R	2	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	tissue envelope, Ipsilateral Fracture Present, Typical swelling				
129	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
129	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
129	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	+
130	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
130	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
130	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis,	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	and/or pucker sign indentation of skin at the fracture site				
130	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
130	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
130	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
130	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	
130	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
130	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
130	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
130	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	2	
130	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
130	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
130	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
131	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
131	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
131	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
131	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
131	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
131	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
131	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
131	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
131	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
131	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
131	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	2	
131	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
131	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
131	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	+
132	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
132	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
132	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
132	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
132	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
132	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
132	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
132	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
132	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
132	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
132	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	2	
132	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
132	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
132	Transphyseal, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
133	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling				
133	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
133	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
133	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
133	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	8	
133	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
133	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	
133	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling				
133	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
133	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	7	
133	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	5	
133	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
133	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
133	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
134	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
134	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
134	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
134	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
134	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
134	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
134	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	
134	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
134	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
134	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
134	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	6	
134	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
134	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
134	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
135	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
135	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
135	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
135	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
135	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
135	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
135	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	
135	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
135	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
135	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	7	
135	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	
135	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
135	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
135	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	+
136	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
136	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling,	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	ecchymosis, and/or pucker sign indentation of skin at the fracture site				
136	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
136	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
136	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
136	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
136	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	indentation of skin at the fracture site				
136	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	5	
136	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
136	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	7	
136	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	6	
136	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	indentation of skin at the fracture site				
136	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
136	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
137	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
137	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
137	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
137	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Present, Typical swelling				
137	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
137	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
137	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	
137	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
137	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
137	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	7	
137	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft	Urgent - Open reduction and pinning and immobilization	M	5	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	tissue envelope, Ipsilateral Fracture Present, Typical swelling				
137	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
137	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
137	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	+
138	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
138	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
138	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis,	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	and/or pucker sign indentation of skin at the fracture site				
138	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
138	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
138	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
138	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	
138	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
138	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
138	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	7	
138	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	6	
138	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
138	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
138	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
139	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
139	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
139	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
139	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
139	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
139	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
139	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
139	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
139	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
139	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	M	6	
139	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	5	
139	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
139	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
139	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	+
140	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
140	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
140	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
140	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
140	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
140	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
140	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	
140	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	5	
140	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
140	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	M	6	
140	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	
140	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
140	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
140	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
141	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling				
141	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
141	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
141	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
141	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
141	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	M	4	
141	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	
141	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling				
141	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	M	4	
141	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	M	6	
141	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	
141	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	3	
141	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
141	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
142	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
142	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
142	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
142	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
142	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	8	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
142	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	3	
142	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	
142	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	
142	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	3	
142	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
142	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	6	
142	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	3	
142	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	2	+
142	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	+
143	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
143	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
143	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
143	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	
143	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
143	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	M	4	
143	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	
143	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	
143	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	M	4	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
143	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	M	6	
143	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	
143	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	M	4	
143	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
143	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	+
144	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
144	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling,	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	ecchymosis, and/or pucker sign indentation of skin at the fracture site				
144	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
144	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
144	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
144	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	3	
144	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	indentation of skin at the fracture site				
144	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	
144	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	3	
144	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	M	6	
144	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	6	
144	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign	Outpatient - Open reduction and pinning and immobilization	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	indentation of skin at the fracture site				
144	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	2	+
144	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	+
145	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
145	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
145	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
145	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present,	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Typical swelling				
145	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
145	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	3	
145	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
145	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	
145	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	3	
145	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	M	5	
145	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue	Urgent - Open reduction and pinning and immobilization	M	5	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	envelope, Ipsilateral Fracture Present, Typical swelling				
145	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	3	
145	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
145	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	+
146	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
146	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
146	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	pucker sign indentation of skin at the fracture site				
146	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
146	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
146	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	3	+
146	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	
146	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	fracture site				
146	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	3	+
146	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	M	4	
146	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	
146	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	2	+
146	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the	Traction	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	fracture site				
146	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	+
147	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
147	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
147	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
147	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
147	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
147	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	3	
147	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
147	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	8	
147	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	3	
147	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	M	4	
147	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	5	
147	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
147	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
147	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	+
148	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
148	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
148	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
148	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
148	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
148	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	3	
148	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
148	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	+
148	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
148	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	M	4	
148	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	
148	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	2	+
148	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	2	+
148	Transphyseal, Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	+
149	Flexion, Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Un-Contaminated, Ipsilateral Fracture Present, Typical swelling				
149	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
149	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
149	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
149	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	
149	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
149	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
149	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Un-Contaminated, Ipsilateral Fracture Present, Typical swelling				
149	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
149	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
149	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	3	+
149	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
149	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
149	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
150	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
150	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
150	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
150	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
150	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
150	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
150	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
150	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	
150	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
150	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
150	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	3	+
150	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
150	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
150	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	
151	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
151	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
151	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
151	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
151	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	
151	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
151	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
151	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	
151	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
151	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
151	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	3	+
151	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
151	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
151	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	External Fixation	R	2	
152	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
152	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis,	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	and/or pucker sign indentation of skin at the fracture site				
152	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
152	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
152	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	
152	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
152	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
152	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	
152	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
152	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
152	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	2	+
152	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
152	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
152	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
153	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
153	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
153	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
153	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Present, Typical swelling				
153	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
153	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
153	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
153	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
153	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
153	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
153	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-	Urgent - Open reduction and pinning and immobilization	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Contaminated, Ipsilateral Fracture Present, Typical swelling				
153	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
153	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
153	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	2	
154	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
154	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
154	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis,	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	and/or pucker sign indentation of skin at the fracture site				
154	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
154	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
154	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
154	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
154	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
154	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
154	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
154	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	2	
154	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
154	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
154	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
155	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
155	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
155	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
155	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
155	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
155	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
155	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
155	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
155	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
155	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
155	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	2	
155	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
155	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
155	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	External Fixation	R	2	
156	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
156	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
156	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
156	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
156	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
156	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
156	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
156	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
156	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
156	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
156	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	2	
156	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
156	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
156	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
157	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling				
157	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
157	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
157	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	9	+
157	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	3	
157	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
157	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
157	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present,	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling				
157	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
157	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
157	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	3	
157	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
157	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
157	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	2	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
158	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
158	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
158	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
158	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	9	+
158	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
158	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
158	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
158	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	3	
158	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
158	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
158	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	3	
158	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
158	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
158	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
159	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
159	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
159	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
159	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	9	+
159	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	3	
159	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
159	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
159	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	3	
159	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
159	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
159	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	3	
159	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
159	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
159	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	2	
160	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
160	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling,	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	ecchymosis, and/or pucker sign indentation of skin at the fracture site				
160	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
160	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	9	+
160	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	3	
160	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
160	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	indentation of skin at the fracture site				
160	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	3	
160	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
160	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
160	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	3	
160	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	indentation of skin at the fracture site				
160	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
160	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
161	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
161	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
161	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
161	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Present, Typical swelling				
161	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
161	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
161	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
161	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
161	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
161	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
161	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-	Urgent - Open reduction and pinning and immobilization	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Contaminated, Ipsilateral Fracture Present, Typical swelling				
161	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
161	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
161	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	2	
162	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
162	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
162	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis,	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	and/or pucker sign indentation of skin at the fracture site				
162	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
162	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
162	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
162	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
162	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
162	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
162	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
162	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	2	+
162	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
162	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
162	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
163	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
163	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
163	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
163	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
163	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
163	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
163	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
163	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	3	
163	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
163	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
163	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	3	
163	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
163	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
163	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	External Fixation	R	2	
164	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
164	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
164	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
164	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
164	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
164	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
164	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
164	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
164	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
164	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
164	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	2	+
164	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
164	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
164	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
165	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated,	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Ipsilateral Fracture Present, Typical swelling				
165	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
165	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
165	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
165	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
165	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
165	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
165	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated,	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Ipsilateral Fracture Present, Typical swelling				
165	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
165	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
165	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	2	+
165	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
165	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
165	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	2	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
166	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
166	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
166	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
166	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
166	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
166	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
166	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
166	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
166	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
166	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
166	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	2	+
166	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
166	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
166	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
167	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
167	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
167	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
167	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
167	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
167	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
167	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
167	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
167	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
167	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
167	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	2	+
167	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
167	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
167	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	External Fixation	R	2	
168	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
168	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	sign indentation of skin at the fracture site				
168	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
168	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
168	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	2	+
168	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
168	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	site				
168	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	2	+
168	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
168	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
168	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	2	+
168	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	site				
168	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
168	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
169	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
169	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
169	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
169	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	9	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Present, Typical swelling				
169	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	3	
169	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
169	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
169	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	3	
169	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
169	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
169	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse,No nerve injury, Closed soft	Urgent - Open reduction and pinning and immobilization	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	tissue envelope, Ipsilateral Fracture Present, Typical swelling				
169	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
169	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
169	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	2	
170	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
170	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
170	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis,	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	and/or pucker sign indentation of skin at the fracture site				
170	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	9	+
170	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	3	
170	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
170	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
170	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
170	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
170	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
170	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	3	
170	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
170	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
170	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
171	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
171	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
171	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
171	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	9	+
171	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	3	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
171	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
171	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
171	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	3	
171	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
171	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
171	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	R	3	
171	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
171	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
171	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	2	
172	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
172	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
172	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
172	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	9	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
172	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	R	3	
172	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
172	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
172	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	R	3	
172	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
172	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
172	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	R	3	
172	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
172	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
172	Flexion , Non-perfused hand (one that is cold, white, and capillary refill > 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
173	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Open-	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Un-Contaminated, Ipsilateral Fracture Present, Typical swelling				
173	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
173	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
173	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
173	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
173	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
173	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
173	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Un-Contaminated, Ipsilateral Fracture Present, Typical swelling				
173	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
173	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	7	
173	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	
173	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
173	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
173	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	2	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
174	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
174	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
174	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
174	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	
174	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	4	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
174	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
174	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	
174	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	4	
174	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
174	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
174	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	
174	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
174	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
174	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
175	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
175	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
175	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
175	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
175	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
175	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
175	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
175	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
175	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
175	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	7	
175	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	
175	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
175	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
175	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	External Fixation	R	2	+
176	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
176	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis,	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	and/or pucker sign indentation of skin at the fracture site				
176	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
176	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
176	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	5	
176	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
176	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
176	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	5	
176	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
176	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	
176	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	
176	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
176	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
176	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
177	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
177	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
177	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
177	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Present, Typical swelling				
177	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	4	
177	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
177	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
177	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	4	
177	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
177	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
177	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-	Urgent - Open reduction and pinning and immobilization	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Contaminated, Ipsilateral Fracture Present, Typical swelling				
177	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
177	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
177	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	2	
178	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
178	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
178	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis,	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	and/or pucker sign indentation of skin at the fracture site				
178	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
178	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	4	
178	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
178	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
178	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	4	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
178	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
178	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
178	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	4	
178	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
178	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
178	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
179	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
179	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
179	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
179	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	+
179	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	4	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
179	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
179	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	+
179	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	4	
179	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
179	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
179	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	
179	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
179	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
179	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	External Fixation	R	2	
180	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
180	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
180	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
180	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
180	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	4	
180	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
180	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
180	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	4	
180	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
180	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
180	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	
180	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
180	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
180	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
181	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling				
181	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
181	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
181	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
181	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
181	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
181	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
181	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present,	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling				
181	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
181	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	7	+
181	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	5	
181	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
181	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
181	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
182	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
182	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
182	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
182	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
182	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
182	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
182	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
182	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
182	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
182	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	7	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
182	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	
182	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
182	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
182	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
183	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
183	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
183	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
183	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
183	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	8	
183	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
183	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	+
183	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	
183	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
183	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	7	+
183	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	5	
183	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
183	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
183	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	+
184	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
184	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling,	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	ecchymosis, and/or pucker sign indentation of skin at the fracture site				
184	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
184	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
184	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
184	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
184	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	indentation of skin at the fracture site				
184	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
184	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
184	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	7	+
184	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	
184	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	indentation of skin at the fracture site				
184	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
184	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
185	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
185	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
185	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
185	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Present, Typical swelling				
185	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
185	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
185	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
185	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
185	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
185	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	7	
185	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-	Urgent - Open reduction and pinning and immobilization	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Contaminated, Ipsilateral Fracture Present, Typical swelling				
185	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
185	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
185	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	2	
186	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
186	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
186	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis,	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	and/or pucker sign indentation of skin at the fracture site				
186	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
186	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
186	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
186	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
186	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
186	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
186	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
186	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	
186	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
186	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
186	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
187	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
187	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
187	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
187	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
187	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
187	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
187	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
187	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
187	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
187	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	7	
187	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	
187	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
187	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
187	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	External Fixation	R	2	
188	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
188	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
188	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
188	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
188	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
188	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
188	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
188	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
188	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
188	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	7	+
188	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	
188	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
188	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
188	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
189	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated,	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Ipsilateral Fracture Present, Typical swelling				
189	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
189	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
189	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
189	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
189	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
189	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
189	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated,	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Ipsilateral Fracture Present, Typical swelling				
189	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
189	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
189	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	
189	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
189	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
189	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	2	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
190	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
190	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
190	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
190	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
190	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	4	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
190	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
190	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
190	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	4	
190	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
190	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
190	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	
190	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
190	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
190	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
191	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
191	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
191	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
191	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
191	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	4	
191	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
191	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	+
191	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	4	
191	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
191	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
191	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	
191	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
191	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
191	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	External Fixation	R	2	
192	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
192	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	sign indentation of skin at the fracture site				
192	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
192	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
192	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	4	
192	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
192	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	site				
192	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	4	
192	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
192	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
192	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	
192	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	site				
192	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
192	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
193	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
193	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
193	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
193	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Present, Typical swelling				
193	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
193	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
193	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	+
193	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
193	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
193	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	7	
193	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft	Urgent - Open reduction and pinning and immobilization	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	tissue envelope, Ipsilateral Fracture Present, Typical swelling				
193	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
193	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
193	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	+
194	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
194	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
194	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis,	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	and/or pucker sign indentation of skin at the fracture site				
194	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
194	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
194	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
194	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	+
194	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
194	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
194	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	7	
194	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	6	
194	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
194	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
194	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
195	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
195	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
195	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
195	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
195	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	8	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
195	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
195	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
195	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
195	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
195	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	7	
195	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	
195	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse,No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
195	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
195	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	+
196	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
196	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
196	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
196	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
196	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
196	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
196	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	+
196	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
196	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
196	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	7	
196	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	6	
196	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
196	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
196	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) without palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	1	+
197	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Open-	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Un-Contaminated, Ipsilateral Fracture Present, Typical swelling				
197	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
197	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
197	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
197	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
197	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
197	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
197	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Un-Contaminated, Ipsilateral Fracture Present, Typical swelling				
197	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
197	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	7	
197	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	A	7	
197	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
197	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
197	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	2	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
198	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
198	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
198	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
198	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
198	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
198	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
198	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	+
198	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
198	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
198	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
198	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	
198	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
198	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
198	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
199	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
199	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
199	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
199	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
199	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
199	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
199	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
199	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
199	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
199	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	7	
199	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	
199	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
199	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
199	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Typical swelling	External Fixation	R	2	
200	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
200	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis,	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	and/or pucker sign indentation of skin at the fracture site				
200	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
200	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
200	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	5	
200	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
200	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
200	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	5	
200	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
200	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	7	
200	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	
200	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
200	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
200	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
201	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
201	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
201	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
201	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Present, Typical swelling				
201	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	4	
201	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
201	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
201	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	4	
201	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
201	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
201	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-	Urgent - Open reduction and pinning and immobilization	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Contaminated, Ipsilateral Fracture Present, Typical swelling				
201	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
201	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
201	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	2	
202	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
202	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
202	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis,	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	and/or pucker sign indentation of skin at the fracture site				
202	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
202	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	4	
202	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
202	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
202	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	4	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
202	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
202	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
202	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	
202	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
202	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	at the fracture site				
202	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
203	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
203	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
203	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
203	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
203	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	4	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
203	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
203	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	+
203	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	4	
203	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
203	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
203	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	5	
203	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
203	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
203	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Typical swelling	External Fixation	R	2	
204	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
204	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
204	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
204	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
204	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	4	
204	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
204	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
204	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	4	
204	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
204	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
204	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	
204	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
204	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
204	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,Open-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
205	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling				
205	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
205	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
205	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
205	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
205	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	M	4	
205	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
205	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present,	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling				
205	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	M	4	
205	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	7	
205	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	A	7	
205	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	M	4	
205	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
205	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	2	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
206	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
206	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
206	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
206	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
206	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	8	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
206	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	M	4	
206	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	+
206	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	
206	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	M	4	
206	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
206	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	A	7	
206	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	M	4	
206	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	2	+
206	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
207	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
207	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
207	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
207	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	+
207	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
207	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	M	4	
207	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	+
207	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	
207	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	M	4	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
207	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	7	
207	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	
207	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	M	4	
207	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
207	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	
208	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
208	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling,	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	ecchymosis, and/or pucker sign indentation of skin at the fracture site				
208	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
208	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
208	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	8	
208	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	M	4	
208	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	indentation of skin at the fracture site				
208	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	
208	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	M	4	
208	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	7	
208	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	A	7	
208	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign	Outpatient - Open reduction and pinning and immobilization	M	4	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	indentation of skin at the fracture site				
208	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	2	+
208	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, Associated nerve injury present, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
209	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
209	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
209	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
209	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	swelling				
209	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
209	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
209	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
209	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	
209	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
209	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	
209	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated,	Urgent - Open reduction and pinning and immobilization	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Ipsilateral Fracture Present, Typical swelling				
209	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
209	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
209	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	2	
210	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
210	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
210	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	sign indentation of skin at the fracture site				
210	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
210	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	5	-
210	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
210	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
210	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	5	-

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	site				
210	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
210	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	7	
210	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	6	
210	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
210	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture	Traction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	site				
210	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
211	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
211	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
211	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
211	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
211	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
211	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
211	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
211	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	
211	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
211	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	7	
211	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	A	7	
211	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
211	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
211	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Typical swelling	External Fixation	R	2	
212	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
212	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
212	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
212	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
212	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	6	
212	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
212	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
212	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	6	
212	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
212	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	7	
212	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	6	
212	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
212	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
212	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Un-Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
213	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated,	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Ipsilateral Fracture Present, Typical swelling				
213	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
213	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
213	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
213	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	4	
213	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
213	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	+
213	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated,	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	4	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	Ipsilateral Fracture Present, Typical swelling				
213	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
213	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
213	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	5	
213	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
213	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
213	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	2	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
214	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
214	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
214	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
214	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
214	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	4	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
214	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
214	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	8	+
214	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	4	
214	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
214	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
214	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	
214	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
214	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
214	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
215	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
215	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
215	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
215	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	+
215	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	5	
215	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
215	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	+
215	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	5	
215	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+
215	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	A	8	+
215	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No	Urgent - Open reduction and pinning and immobilization	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
	nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling				
215	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	R	1	+
215	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
215	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Typical swelling	External Fixation	R	2	
216	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
216	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
216	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
216	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
216	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	M	4	
216	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	R	1	+
216	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
216	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	M	4	
216	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
216	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	A	8	+
216	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	M	5	
216	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	R	1	+
216	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	1	+
216	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury,Open- Contaminated, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
217	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
217	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
217	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+
217	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
217	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
217	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	M	5	
217	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
217	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
217	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	M	4	
217	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Emergent - Open reduction and pinning and immobilization	M	6	
217	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	
217	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Outpatient - Open reduction and pinning and immobilization	M	4	
217	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	Traction	R	1	+
217	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Typical swelling	External Fixation	R	1	
218	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
218	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+
218	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
218	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
218	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
218	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	M	4	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
218	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
218	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	
218	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	M	4	
218	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	M	6	
218	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
218	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	M	4	
218	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	2	+
218	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, Ipsilateral Fracture Present, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	
219	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Immobilization with cast or splint without reduction	R	1	+
219	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at 70-90 degrees	R	1	+
219	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Reduction with subsequent casting at > 90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
219	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
219	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	8	+
219	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	M	5	
219	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	
219	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	
219	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Closed reduction with pinning and immobilization with cross pinning	M	4	
219	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Emergent - Open reduction and pinning and immobilization	M	6	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
219	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Urgent - Open reduction and pinning and immobilization	M	6	
219	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Outpatient - Open reduction and pinning and immobilization	M	5	
219	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	Traction	R	1	+
219	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Typical swelling	External Fixation	R	1	
220	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Immobilization with cast or splint without reduction	R	1	+
220	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse,No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at 70-90 degrees	R	1	+

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
220	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Reduction with subsequent casting at > 90 degrees	R	1	+
220	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with lateral pinning	A	7	+
220	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with lateral pinning	A	7	
220	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with lateral pinning	M	4	
220	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Closed reduction with pinning and immobilization with cross pinning	A	7	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
220	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Closed reduction with pinning and immobilization with cross pinning	A	7	
220	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Closed reduction with pinning and immobilization with cross pinning	M	4	
220	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Emergent - Open reduction and pinning and immobilization	M	6	
220	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Urgent - Open reduction and pinning and immobilization	A	7	
220	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Outpatient - Open reduction and pinning and immobilization	M	4	

Scenario Number	Scenario Details	Treatment	Appropriateness	Median Rating	Agreement
220	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	Traction	R	2	+
220	Flexion , Perfused hand (one that is warm, pink, and capillary refill < 3 seconds) with palpable distal pulse, No nerve injury, Closed soft tissue envelope, No Ipsilateral Fracture, Severe swelling, ecchymosis, and/or pucker sign indentation of skin at the fracture site	External Fixation	R	2	

APPENDICES

APPENDIX A. DOCUMENTATION OF APPROVAL

AAOS BODIES THAT APPROVED THIS APPROPRIATE USE CRITERIA

AUC Section: Approved on <DATE>

The AAOS Appropriate Use Criteria Section of the Committee on Evidence Based Quality and Value consists of six AAOS members. The overall purpose of this Section is to plan, organize, direct, and evaluate initiatives related to Appropriate Use Criteria.

Council on Research and Quality: Approved on <DATE>

To enhance the mission of the AAOS, the Council on Research and Quality promotes the most ethically and scientifically sound basic, clinical, and translational research possible to ensure the future care for patients with musculoskeletal disorders. The Council also serves as the primary resource to educate its members, the public, and public policy makers regarding evidenced-based medical practice, orthopaedic devices and biologics regulatory pathways and standards development, patient safety, occupational health, technology assessment, and other related areas of importance.

Board of Directors: Approved on <DATE>

The 16 member AAOS Board of Directors manages the affairs of the AAOS, sets policy, and determines and continually reassesses the Strategic Plan.

APPENDIX B. DISCLOSURE INFORMATION

Writing Panel

Fizan Abdullah, MD, PhD: (n); Submitted on: 07/03/2013

Matthew Halsey, MD: 9 (Scoliosis Research Society); Submitted on: 04/02/2014

Christine Ann Ho, MD: (n); Submitted on: 04/02/2014

David Leu, MD: 2 (Baxter); 3B (Baxter); 9 (Baltimore City Medical Society); Submitted on: 08/06/2014

Kathleen A McHale, MD: 9 (AAOS); Submitted on: 04/01/2014

Kevin McHorse, PT, SCS: 9 (Sports Section of APTA); Submitted on: 08/07/2014

James F Mooney III, MD: 5 (Synthes); 8 (JSOA; Pediatric Radiology); 9 (Pediatric Orthopaedic Society of North America; Scoliosis Research Society); Submitted on: 04/02/2014

Kishore Mulpuri, MD: 5 (DePuy, A Johnson & Johnson Company); 9 (Canadian Orthopaedic Association; International Hip Dysplasia Institute; Pediatric Orthopaedic Society of North America); Submitted on: 05/29/2014

David Nelson, MD: (n); Submitted on: 08/06/2014

Matthew Oetgen, MD: 3B (Medtronic); 9 (AAOS; Pediatric Orthopaedic Society of North America; Scoliosis Research Society); Submitted on: 04/01/2014

Larry L Pack, MD: 9 (Board of Directors of the Michigan Orthopaedic Society); Submitted on: 08/06/2014

Laurel H Saliman, MD: (n); Submitted on: 07/03/2013

John Michael Stephenson, MD: 9 (American Society for Surgery of the Hand); Submitted on: 04/01/2014

Yi-Meng Yen, MD: 3A (Agios Pharmaceuticals); 3B (Smith & Nephew; Orthopediatrics; Arthrex, Inc); 4 (Agios Pharmaceuticals); Submitted on: 05/02/2014

Review Panel

Donald S Bae, MD: 4 (DTRX; Johnson & Johnson; VVUS); 7 (Lippincott Williams & Wilkins); 9 (ASSH; POSNA); Submitted on: 04/09/2014

Holly J Benjamin, MD: 9 (American Academy of Pediatrics; American College of Sports Medicine; American Medical Society for Sports Medicine; ICAAP); Submitted on: 01/30/2014

R Dale Blasier, MD: 2 (Synthes); 9 (AAOS; North American Spine Society; Scoliosis Research Society); Submitted on: 04/10/2014

Patrick P Bosch, MD: 5 (Haemonetics); 9 (Pediatric Orthopaedic Society of North America; Scoliosis Research Society); Submitted on: 08/07/2014

Gregory John Della Rocca, MD, PhD: 2 (Synthes); 3B (LifeNet Health; Intellectual Ventures; Synthes; Bioventus); 4 (Amedica; The Orthopaedic Implant Company; MergeNet); 5 (Wound Care Technologies; Eli Lilly; Sonoma Orthopaedics); 8 (Geriatric Orthopaedic Surgery and Rehabilitation; Journal of Bone and Joint Surgery - American; Journal of Orthopaedic Trauma; Journal of the American Academy of Orthopaedic Surgeons); 9 (AAOS; Orthopaedic Trauma Association; American College of Surgeons); Submitted on: 04/01/2014

Eric William Edmonds, MD: 2 (Arthrex, Inc; Orthopediatrics); 5 (Inion); 9 (AAOS; American Orthopaedic Society for Sports Medicine; Pediatric Orthopaedic Society of North America); Submitted on: 04/16/2014

Hilton P Gottschalk, MD: 3A (Biogen Idec); 4 (Biogen Idec); 8 (Biogen Idec); Submitted on: 04/01/2014

Daniel William Green, MD: 1 (Pega Medical); 2 (Arthrex, Inc); 7 (Current Opinion in Pediatrics); 8 (Current Opinion in Pediatrics; Current Opinion in Pediatrics); 9 (AAOS; AAOS; New York County Medical Society; new york state society of orthopedic surgeons; Pediatric Orthopaedic Society of North America; Scoliosis Research Society); Submitted on: 04/28/2014

Sumit Gupta, MD: (n); Submitted on: 04/01/2014

James F. Hanley, MD: (n); Submitted on: 01/28/2014

Daniel Patrick Hely, MD: (n); Submitted on: 01/12/2014

Stephanie M Holmes, MD: (n); Submitted on: 04/01/2014

Pooya Hosseinzadeh, MD: (n); Submitted on: 04/02/2014

Charles J Hyman, MD: (n); Submitted on: 02/24/2014

Mark T Kraus, MD: (n); Submitted on: 01/17/2014

Walter F Kregel III, MD: 4 (Amgen Co; Bristol-Myers Squibb; Edwards Life Sciences; GNC; HCA; MAKO; Tiva Pharmaceuticals; Vertex); 8 (Evidence Based Spine Journal (Ad Hoc Reveiwer),CLinical Journal of Pain (Ad Hoc Reviewer),CORR(Ad Hoc Reviewer)); Submitted on: 08/06/2014

Kevin J Little, MD: 9 (American Association for Hand Surgery); Submitted on: 04/01/2014

John Loiselle, MD: (n); Submitted on: 02/06/2014

John Fletcher Lovejoy, MD: 9 (Pediatric Orthopaedic Society of North America); Submitted on: 01/28/2014

Douglas W Lundy, MD: 4 (Livengood Engineering); 8 (Clinical Orthopaedics and Related Research; Journal of Orthopaedic Trauma; Journal of the Southern Medical Association; Orthopedics); 9 (AAOS; American Board of Orthopaedic Surgery, Inc.; American College of Surgeons; Georgia Orthopaedic Society; Orthopaedic Trauma Association); Submitted on: 05/17/2014

Stephen A Mendelson, MD: (n); Submitted on: 08/07/2014

Joshua Stephen Murphy, MD: (n); Submitted on: 04/01/2014

Sara K Rasmussen, MD, PhD: (n); Submitted on: 02/17/2014

Jeff E Schunk, MD: No disclosure available

Richard M Schwend, MD: 2 (Medtronic); 9 (Pediatric Orthopaedic Society of North America, American Academy of Pediatrics, Project Perfect World, Miracle Feet); Submitted on: 06/16/2014

Mauricio Silva, MD: 9 (World Federation of Hemophilia); Submitted on: 08/09/2014

Vikas Trivedi, MD: (n); Submitted on: 08/07/2014

Voting Panel

Jeffrey Anglen, MD, FACS: 3B (DJ Orthopaedics; Eli Lilly); 8 (Journal of the American Academy of Orthopaedic Surgeons); 9 (American Board of Orthopaedic Surgery, Inc.); Submitted on: 01/06/2014

Teresa Cappello, MD: (n); Submitted on: 04/08/2014

Robert Boyd Carrigan, MD: 3A (GlaxoSmithKline); 4 (GlaxoSmithKline); Submitted on: 01/27/2014

Prasad V Gourineni, MD: 4 (G2Healthcare); Submitted on: 04/01/2014

William L Hennrikus Jr, MD: 9 (Pediatric Orthopaedic Society of North America; Society of Military Orthopaedic Surgeons); Submitted on: 04/01/2014

Danielle Katz, MD: 4 (Procter & Gamble); 9 (American College of Surgeons); Submitted on: 01/26/2014

Annalise Noelle Larson, MD: 9 (Scoliosis Research Society); Submitted on: 04/01/2014

Kevin H Latz, MD: 9 (Pediatric Orthopaedic Society of North America); Submitted on: 04/12/2014

William M Miranda, MD: (n); Submitted on: 06/10/2014

Norman Yoshinobu Otsuka, MD: 3C (Medsonics); 8 (American Journal of Orthopedics; Journal of Children's Orthopaedics; Journal of Orthopaedic Surgical Advances; Journal of Pediatric Orthopedics, Part B); 9 (AAOS; American Academy of Pediatrics; American College of Surgeons; Bone and Joint Decade, U.S.A.; Pediatric Orthopaedic Society of North America; Pediatric Orthopaedic Society of North America); Submitted on: 04/08/2014

Min Jung Park, MD, MSc: (n); Submitted on: 04/01/2014

Peter D Pizzutillo, MD: 8 (Journal of Pediatric Orthopedics; Pediatric Review); 9 (AAOS); Submitted on: 04/28/2014

Brian Snyder, MD, PhD: 9 (Pediatric Orthopaedic Society of North America; Scoliosis Research Society); Submitted on: 04/01/2014

Dale P Woolridge, MD, PhD: (n); Submitted on: 02/07/2014

Moderators:

Michael H Heggeness, MD: 1 (K2M; Relievable Medsystems); 4 (Relievable medsystems.); 8 (Spine; The Spine Journal Deputy editor); 9 (North American Spine Society); Submitted on: 10/02/2013

James O Sanders, MD 4 (Abbott; Abbvie; GE Healthcare; Hospira); 8 (Journal of Pediatric Orthopedics); 9 (AAOS; Pediatric Orthopaedic Society of North America; Scoliosis Research Society); Submitted on: 04/01/2014

(n) = Respondent answered 'No' to all items indicating no conflicts.

1= Royalties from a company or supplier; 2= Speakers bureau/paid presentations for a company or supplier; 3A= Paid employee for a company or supplier; 3B= Paid consultant for a company or supplier; 3C= Unpaid consultant for a company or supplier; 4= Stock or stock options in a company or supplier; 5= Research support from a company or supplier as a PI; 6= Other financial or material support from a company or supplier; 7= Royalties, financial or material support from publishers; 8= Medical/Orthopaedic publications editorial/governing board; 9= Board member/committee appointments for a society.

APPENDIX C. REFERENCES

- (1) American Academy of Orthopaedic Surgeons. The Burden of Musculoskeletal Diseases in the United States. American Academy of Orthopaedic Surgeons; 2008.
- (2) Fitch K, Bernstein SJ, Aguilar MD et al. *The RAND/UCLA Appropriateness Method User's Manual*. Santa Monica, CA: RAND Corporation; 2001.
- (3) Houshian S, Mehdi B, Larsen MS. The epidemiology of elbow fracture in children: analysis of 355 fractures, with special reference to supracondylar humerus fractures. *J Orthop Sci* 2001;6(4):312-315.
- (4) Sutton WR, Greene WB, Georgopoulos G, Dameron TB, Jr. Displaced supracondylar humeral fractures in children. A comparison of results and costs in patients treated by skeletal traction versus percutaneous pinning. *Clin Orthop Relat Res* 1992;(278):81-87.