

distress. If this happens, it is important to contact us for advice or further treatment. This is particularly important if your child is not at the stage of being able to tell you what is troubling them.

Venous thromboembolism

Venous thromboembolism (VTE) refers to two conditions: deep vein thrombosis (DVT) and pulmonary embolism (PE).

VTE is associated with reduced mobility so if you need a leg cast you will be asked to complete a questionnaire to help us assess your level of risk of VTE.

Depending on your level of risk you may need to have blood thinning medication for the time you are in your cast/boot. The doctor will discuss this with you and you will be advised how to take the medication.

For Soft Cast plaster only

If you need to attend any hospital with a problem please advise staff this cast can be unwound and cut off with scissors. A cast saw should NOT be used. This is because this plaster is very thin and a saw could damage your skin.

Where to seek help if you have a problem with your cast

Please call the Plaster Room number on the front cover between 8.30am and 5pm Monday to Friday OR outside of these hours please go to your local Emergency Department and tell them you have a problem with your plaster cast.

Author: Karen Smith
Role: Orthopaedic Practitioner
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If you need this information in another language or medium (audio, large print, etc) please contact Customer Care Team on 0800 374 208 email: customer.care@salisbury.nhs.uk.

You are entitled to a copy of any letter we write about you. Please ask if you want one when you come to the hospital.

The evidence used in the preparation of this leaflet is available on request. Please email patient.information@salisbury.nhs.uk if you would like a reference list.

If you are unhappy with the advice you have been given by your GP, consultant, or another healthcare professional, you may ask for a second (or further) opinion.

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Salisbury District Hospital
Salisbury, Wiltshire SP2 8BJ
www.salisbury.nhs.uk



information

Instructions for patients in a cast

Plaster Room
 **01722 429139**

**Plastics Trauma
Clinic**
 **01722 336262**
ext. 3240

Caring for your cast

This leaflet will help you to look after your plaster cast and tell you when to seek help if you have any problems.

General advice

- check if it fits correctly and look out for any signs of cracking, rubbing, any discharge or bad smell coming from within your cast as it could be a sign of infection, especially if you have had surgery.
- if your cast is on your leg make sure you keep your foot higher than your hip to reduce swelling.
- pressure damage (pressure ulcers and sores) under a cast may be felt as a burning or itching sensation. To avoid pressure damage, you should keep the pressure off your heel at all times and use pillows to support the affected limb, and remember to change position as often as you can.
- you can only walk on your cast if you have been given a cast sandal, and you must wait for the cast to dry completely before you walk on it. This takes 1 to 2 days for plaster of Paris casts and 1 hour for synthetic casts.
- it's important to keep moving all of your joints that aren't covered by the cast, especially your fingers, toes, elbows and shoulders.

Contact the hospital on the numbers over the page if you have any of the following:

- your fingers or toes become swollen, blue, numb or difficult to move.
- the cast cracks, becomes too loose or too tight or in any way uncomfortable.
- you have severe pain which feels worse than the original injury.

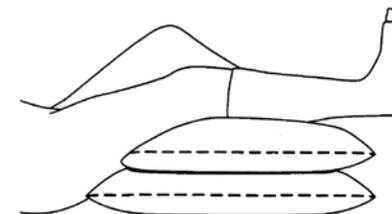
What not to do

- don't get your cast wet or use plastic bags, bin liners or cling film to keep it dry. They do not work. Special covers can be bought, ask staff for details. Alternatively, wrap a towel around the cast and keep it well away from the water when you wash or bathe.
- don't cut the cast if it's rubbing or causing discomfort - contact us for help on one of the numbers given.
- don't put anything down your cast to scratch as it could cause an infection if there is any broken skin under the cast.
- don't heat your cast to dry it quicker.
- don't drive your car unless you have checked with your insurance company that it is alright for you to do so.

Keep your leg raised

It's important to raise the affected limb as much as possible. Keep an injured leg up on two or more pillows turned lengthways to support your whole leg from hip to

ankle. The plaster may feel tight for a short while after it's first applied, and raising the limb can usually relieve this. The image below shows the correct way to raise your leg.



High risk for pressure damage

If you have been identified as being at high risk of developing a pressure-related injury your cast will be white with red bands at the top and bottom. If you or your carers have any concerns with your cast please contact the Plaster Room as soon as possible. Out of hours please go to your nearest Emergency Department.

If someone is helping you move

- ask them to take great care when lifting or moving any limb in a plaster cast.
- make sure they do not drag your leg when lifting you up as this causes friction and can cause a pressure sore.

Your child's plaster cast

If your child becomes unsettled it may be a sign that the cast is causing them