Caring for Your Cast
Information for patients
You have been prescribed a cast as treatment for your injury. The doctors and nurses will tell you how long you need to wear this cast.

This leaflet has been written to give you a few recommendations to follow, to help you care for your limb and cast.

**Washing**

Avoid getting water in or on the cast, as it is not waterproof. The padding inside the cast does not dry out easily and can cause your skin to become soggy, smelly and unpleasant. Plaster of Paris casts will also start to fall apart if they get wet.

Please contact the Plaster Room straight away if you get your cast and/or the padding wet. Contact numbers are at the end of the leaflet.

If you have a cast below your elbow or knee, it can be protected using a plastic bag (with no holes) and tape to seal it around the top. This will not make the cast waterproof, but it can protect it from splashes.

Casts above the elbow or knee are more difficult to protect from water, so a sponge or damp flannel wash is recommended, rather than a shower or bath.

You can buy special waterproof covers from outside companies. Please ask your nurse for more information.
Skin care

Your skin under the cast may become itchy, due to dry skin. Avoid scratching and do not stick objects down inside your cast, as the skin under the cast can be broken and may become infected.

You can wash your fingers and toes gently using a cloth or flannel. Dry carefully in between them, to make sure your skin is not left damp. Please avoid using moisturisers, as these can make the skin too damp.

As the cast is designed to hold your limb in one position, this can increase the risk of skin damage, which can lead to significant sores. If you feel discomfort or rubbing beneath your cast, please contact the Plaster Room (see the end of the leaflet for telephone numbers).

If you are a carer looking after someone who cannot tell you they are in discomfort, please look for other signs of pain or areas of redness and contact the Plaster Room with any concerns.

Elevation

It is important and recommended that you elevate (raise up) your injured limb. This will help fluid to drain from your injured limb and reduce any swelling that may cause your cast to feel tight.

Arm

If your arm is in a cast, you can keep it in the sling provided or on cushions. Make sure that your hand is higher than your elbow.

Leg

Please make sure that your ankle is higher than your hip. This will help fluid to drain from your leg and prevent swelling.
Deep vein thrombosis (DVT)

There is a small risk of DVT in the leg if you have a fracture or plaster cast on your leg for a foot and/or an ankle injury, particularly if you are unable to put any weight on your limb. However, this risk is low.

DVTs are blood clots that can develop in deep leg veins and may block the normal flow of blood. Your doctor will assess you, to see if you are more at risk of developing a DVT. If they think that you are at high risk of developing a DVT they may recommend you are given a course of a blood thinning medication called dalteparin.

To help prevent a DVT, we recommend that whilst you are in a leg cast you:

- stop smoking
- do regular exercises (wiggle your toes, bend and straighten your knee, if possible, and keep as mobile as possible with the help of your crutches).

A DVT is treatable, but it is best to try to prevent it from happening.

Signs and symptoms of a DVT

If you experience pain or tenderness in your calf, and swelling of your injured leg, please contact the Trauma Outpatient Department and we will arrange to assess you. Outside of opening hours, please go to your nearest Emergency Department.
Exercises

Exercise your toes or fingers whenever possible. This will help to move fluid and prevent the joint getting stiff. We recommend that you also exercise your shoulder and elbow joint, or knee and hip joint, whenever possible.

If you have a leg cast, please ask your doctor or nurse about when you can walk on your cast and how much weight you can put through it.

Signs to look out for

Please phone the Plaster Room for advice if you experience:
• continued coldness or white/blue discoloration of your fingers or toes, that isn’t bruising
• pain, pins and needles, or numbness in your fingers or toes
• inability to move your fingers or toes
• painful rubbing beneath or on the edges of the cast
• continued pain in your injured limb, despite taking regular painkillers
• your cast becoming wet, broken, cracked or too loose or tight
• very swollen fingers or toes, despite elevation
• an object becoming lodged in your cast.
• any fluid coming through your cast.

Remember

1. Avoid getting your cast wet.
2. Elevate your limb where possible.
3. Avoid sticking objects down/inside your cast.
Useful telephone numbers

**John Radcliffe Hospital**

**Plaster Room**
Tel: 01865 220 219

(9.00am to 5.00pm, Monday, Tuesday, Thursday and Friday)
(9.00am to 1.00pm, Wednesday)
(8.00am to 11.00am, Saturday and Sunday)

**Trauma Outpatient Appointments**
Tel: 01865 220 217

**Trauma Outpatient Department**
Tel: 01865 740 315

(9.00am to 5.00pm, Monday, Tuesday, Thursday and Friday)
(9.00am to 1.00pm, Wednesday)
(8.00am to 11.00am, Saturday and Sunday)

**Horton General Hospital**

**Plaster Room**
Tel: 01295 229 361

(8.30am to 12.00pm, Monday to Friday)
(8.30am to 11.00am, Saturday and Sunday)

**Trauma Outpatient Appointments**
Tel: 01295 229 367

**Trauma Outpatient Department**
Tel: 01295 229 606

(8.30am to 12.00pm, Monday to Friday)
If you have a specific requirement, need an interpreter, a document in Easy Read, another language, large print, Braille or audio version, please call 01865 221 473 or email PALS@ouh.nhs.uk