

Emergency Department

# Caring for your temporary plaster cast

Information for patients



## Plaster cast advice

A temporary cast has been applied to your injured limb to hold it in one position until you are seen in the trauma outpatient clinic.

Your cast is made of a substance called Plaster of Paris. It can take up to 48 hours to completely dry. It is important that you do not knock or put pressure on your cast whilst it is drying, as this may crack or dent it.

## Elevation

It is important you elevate (raise) your injured limb as much as possible for the first 48 hours. This will help fluid to drain from your injured limb and reduce any swelling that may cause your plaster cast to feel tight.

### **Arm**

- Keep your arm elevated in the sling we have given you, or on cushions.
- Make sure that your hand is higher than your elbow.
- Exercise your fingers, elbow and shoulder.

### **Leg**

- Keep your leg raised on a pillow or stool so that your ankle is higher than your hip.
- Exercise your toes.

## Exercises

While your arm or leg is in a plaster cast, it is important that you move your fingers or toes regularly. This will help move fluid and prevent your joints becoming stiff.

If you have an arm injury, you should also exercise your shoulder and elbow joint when possible.

## Skin care

Your skin under the cast may become itchy due to dry skin.

Do not push anything down inside the plaster cast as this may break your skin and result in an infection.

Fingers and toes can be washed gently using a cloth. Dry carefully inbetween your fingers and toes to make sure your skin is not left damp.

## Washing

Do not get water in or on your plaster cast, as it is not waterproof and will become soggy.

You can buy specially designed waterproof covers to keep your plaster cast dry when bathing or showering. Please ask the nurses in the trauma outpatient clinic for further details.

## Signs to look out for

Please contact the trauma outpatient clinic or minor side of the Emergency Departments (see contact numbers at the end of the leaflet) if you experience:

- continued coldness or white/blue discolouration of your fingers or toes that isn't bruising
- pain, pins and needles, or numbness in your fingers or toes
- painful rubbing beneath your plaster cast
- continued pain in your injured limb despite taking regular painkiller
- inability to move your fingers or toes
- very swollen fingers or toes despite continued elevation
- your plaster cast becoming soft, wet, broken, cracked or too loose or tight
- an object becoming lodged in your plaster cast.

## Remember

- Elevate your limb whenever possible.
- Do not remove any of your cast padding.
- Do not push anything down inside your plaster cast.
- Do not get your plaster cast wet.

## Useful telephone numbers

Trauma outpatient clinic, John Radcliffe Hospital

**Tel: 01865 740 315**

(Office hours only)

Plaster room, John Radcliffe Hospital

**Tel: 01865 220 219**

(Office hours only)

Minor side, Emergency Department, John Radcliffe Hospital

**Tel: 01865 220 224**

(24 hours)

Plaster room, Horton General Hospital

**Tel: 01295 229 361**

(Mornings only)

Emergency Department, Horton General Hospital

**Tel: 01295 229 412**

(24 hours)

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 **PALSJR@ouh.nhs.uk**

Emergency Nurse Practitioner team  
November 2014  
Review: November 2017  
Oxford University Hospitals NHS Trust  
Oxford OX3 9DU  
[www.ouh.nhs.uk/information](http://www.ouh.nhs.uk/information)

