Cast Care

Patient and Family Education

This teaching sheet contains general information only. Talk with your child’s doctor or a member of your child’s healthcare team about specific care of your child.

What is a cast?
A cast is a stiff, solid dressing that supports a body part while a bone is healing after an injury or surgery. They are either made of plaster or fiberglass. At first, the cast will be damp and feel warm and heavy while it dries. Your child’s doctor will talk with you about specific care of the cast for your child. Some general guidelines to follow are listed below.

How do I care for my child’s cast?
- After application, let the cast dry completely. DO NOT cover it. If your child has a fiberglass cast, it usually takes about 30 to 45 minutes to dry. If your child has a plaster cast, it usually takes 1 to 3 days to dry.
- Keep the extremity (arm or leg) with the cast raised above the level of the heart to prevent swelling.
- Use pillows to prop the cast off hard surfaces. By doing this, you can avoid dents in the cast.
- Once the cast is dry, tape over the rough edges. This is called petaling.
  1. Cut 3 inch strips of moleskin. Round the edges.
  2. Tuck one end under the cast, taping it to the cotton lining. Smooth out any creases, which can irritate the skin.
  3. Bring the free end of moleskin over to the outside of the cast.
  4. Continue to overlap moleskin pieces until all the rough edges are covered.

Note: Do not force the moleskin under the cast. Do not trim the cast yourself.
- If a plaster cast becomes dirty, clean it with a slightly damp cloth. DO NOT use soap. Be sure not to get the cast wet.
- If a fiberglass cast gets dirty, clean it with a damp cloth and soap. Baby wipes also work well. Be sure to wipe off any moisture.

How do I care for my child each day?
- Give your child a sponge bath. Cover the cast with a plastic bag during the sponge bath. Use a damp – not wet – cloth and mild soap to clean skin you can reach with your hand. Dry it completely with a towel.
- You may bathe your child in a bathtub if you use a cast protector.
- Keep any rough edges of the cast covered with moleskin or pink tape.

In case of an urgent concern or emergency, call 911 or go to the nearest emergency department right away.
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- Check the skin around and under the edges of the cast each day for dry, reddened or irritated areas.
- Do not use lotions, oils or powder around the edges or under the cast.
- Be sure the top end of the cast does not indent the skin when sitting or resting. This can cause skin damage and swelling of the limb.
- While your child is awake, change the position of the limb with the cast about every 2 hours. This helps to keep pressure off the skin from the cast.

What about itching?
- **DO NOT** let your child put anything inside the cast. This could hurt the skin and cause infection.
- Gently pat the cast above the area that itches.
- Keep your child as cool as possible.
- Put a well-sealed ice bag on the cast over the area that itches.
- Change your child’s position to shift the weight of the cast.
- Use a hair dryer to blow cool air under the cast.
- If the itching is very bad, ask your child’s doctor about medicine for itching.

Check sensation and circulation
Make sure the cast is not too tight and that blood can flow well around the cast. Every 8 hours, or more often if needed, be sure to check:

- **Movement of toes and fingers**: Have your child move or wiggle his fingers or toes.
- **Sensation (feeling)**: Touch the area above and below the cast several times a day. Call your child’s doctor right away if your child complains of numbness, tingling or pain.
- **Blood flow (circulation)**: Press briefly on your child’s middle fingernail or large toenail several times a day. When it turns white, let go. If pink color does not return in 3 seconds, call your child’s doctor right away.
- **Temperature**: If your child’s hand or foot is cold, cover it with a blanket or sock or raise it above the level of the heart. Check it again in 20 minutes. If it is still cold, check feeling and blood flow. If you think there may be a problem, call your child’s doctor right away.
- **Severe swelling**: Look for swelling above and below the cast several times each day. A little swelling is normal, but a lot of swelling is not. Compare the limb with the cast to the other one. If there is swelling, raise it higher than the level of the heart for 1 hour. Call your child’s doctor if the swelling does not go down.

Check for drainage
When a cast covers a wound, there will be some red or reddish-brown drainage for the first 2 days. After this, drainage may be a sign of a problem. Circle the area of the drainage on the cast with a felt-tipped pen. Write down the date and time it happened.

Call your child’s doctor right away if:
- The drainage is bright red. This can happen even though the cast is not over a wound.
- There is drainage from the cast.
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How can my child be comfortable with a cast?

- Have your child rest the first few days. Do not let him do anything too tiring or active, such as running, jumping or climbing.
- To help prevent swelling, have your child keep the limb (arm or leg) propped on pillows above the level of the heart for 2 to 3 days.
- Have your child wiggle his fingers and toes often to increase blood flow and decrease swelling.
- If the limb swells after activity, raise it higher than the level of the heart.

Arm casts:

- If your child is using a sling to support an arm, raise the wrist higher than the elbow when your child walks or sits.
- Use a sling only as directed by his doctor.

Leg casts:

- Keep pressure off the heels when your child is lying down to prevent sores on the heels.
- When your child is lying on his back: Put his legs on a small pillow or rolled towel, with the heel over the edge.
- When your child is lying face-down: Let his feet hang over the end of the mattress.
- When your child is lying on his side: Put a thin pillow between his legs.

What should I know about cast safety?

- Avoid knocking the cast against things. Check often for cracks, dents, tightness or looseness. Call your child’s doctor if you notice any of these.
- Poor cast care can cause serious problems. If a broken or damaged cast is not fixed, the bone might not heal right. If the cast breaks, keep the area as still as possible, and call your child’s doctor.
- If your child’s doctor allows your child to walk on the cast, clear the path of toys, small floor rugs, pets and other things that your child might trip over.
- Do not let your child walk on wet, slippery or waxed floors. Make sure he wears a flat, non-skid, supportive cast shoe.
- Cover the cast with a towel at meals to keep food from spilling inside.

Is it OK to sign the cast?

Family and friends may want to sign their names or draw pictures on the cast. That is OK, but do not let them paint over large areas. This could seal the cast so air cannot get in, which can hurt the skin under the cast.

How is the cast taken off?

Sometimes, a cast has to be taken off for a short time to check the part of the body it covers. When the bone has healed completely, the cast will be taken off for good.

- A technician will use a vibrating cast cutter to open both sides of the cast from one end to the other. The cutter will make a very loud buzzing noise, like a vacuum cleaner. Your child may feel some pressure or tingling, but it does not hurt.
- The technician then spreads the 2 halves of the cast with a metal tool.
- Finally, he uses special scissors to cut the cotton lining.
- For babies, some of the casting material can be removed without cutting.

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Your child’s doctor will check your child’s limb to see how it has healed. Sometimes, X-rays are taken. Your child’s doctor will let you know if any other treatment is needed.

What happens after the cast is off?
- The limb may look and feel a little different for a while, but soon it will begin to feel like it did before.
- The skin will look dry, pale and scaly. To soften and remove the dead skin, soak the limb in warm water, and use a moisturizing lotion. Never scrub to remove the scales.

When should I call the doctor?
Call your child’s doctor right away if your child has any of these:
- Numbness or tingling in the extremity with the cast
- Pain that is different from what he has had before
- Pain that does not get better with medicine ordered by his doctor
- Swelling of the fingers, toes or limb that does not “pink up” after 20 minutes of raising them higher than the level of the heart
- Decreased or loss of movement in the fingers or toes
- Change in skin color below the cast
- Skin becomes red or irritated or sores develop
- Bad smell from inside the cast
- Bright red drainage on the cast
- Fever over 100.3 F (or 38°C) for longer than 24 hours with no other symptoms
- A crack in the cast
- A wet cast that does not dry completely
- Something stuck in the cast

Your Checklist

This list can help you keep track of what you need to know about your child’s cast or spica cast before your child goes home. Ask your child’s nurse, therapist or doctor for help if you need more information.

Before your child goes home, make sure you know:
- Why your child has a cast.
- How to wash your hands before and after giving your child cast care
- How to:
  - “Petal” the cast.
  - Relieve itching.
  - Give your child a sponge bath.
  - Dry your child’s skin and cast.
  - Diaper or toilet your child.
- How to check your child’s fingers, toes or skin for:
  - Good blood flow
  - Good nerve sensation
  - Skin problems
  - Infection

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- How to:
  - Walk or transfer your child.
  - Use crutches if needed.
  - Use a wheelchair if needed.
  - Use a car seat or seat belt as needed.

- How to obtain supplies.
- When to call the doctor or healthcare provider with questions or problems.

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