Splint 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 splint?
A splint is a hard device that holds an injured part of the body still while it heals. Splints can be made from plaster, fiberglass or can be a “ready made”. Splints come in many sizes. Some splints are called air casts.

A fiberglass splint is cut to the correct size and shape of your child’s injured body part. The splint hardens and keeps its shape. An elastic bandage secures it and allows room for swelling.

Why are splints used instead of a cast?
Splints may be used instead of a cast because:
- Broken bones cause swelling that can lead to a poor fitting cast.
- A splint can help to keep the bone stable until the swelling improves and a cast can be applied.

Are splints only used for broken bones?
- Splints can also be used to treat sprains and strains.
- Fiberglass splints provide strong support while the injury heals. It can be left in place safely for 1 to 2 weeks.

How can I help reduce swelling?
- Raise the splinted arm or leg above the level of the heart as much as possible.
- Apply ice to the injury for the first 24 to 48 hours to reduce swelling and pain. Wrap the ice pack with a towel or plastic bag to help protect your child’s skin and keep the splint dry.
- For arm splints:
  - Use a sling as directed.
  - When using a sling, raise the wrist higher than the elbow while walking or sitting. Do not let your child wear the sling to bed.
- For foot or leg splints:
  - Raise the leg as often as possible to decrease swelling.
  - Limit activities as directed by your child’s doctor.
  - Your child may need to use crutches.

Can my child take a bath or shower?
- Unless your splint is waterproof, keep the splint dry.
- Wrap the splint with plastic wrap or a plastic garbage bag while bathing.
- Do not remove the splint for bathing if your child has a broken bone.
- If the splint is being used for a sprain or strain (not a broken bone), your doctor may allow you to remove the splint while bathing and reapply it yourself.
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What do I need to know to care for my child?
Make sure the splint is not too tight and that blood can flow well to all body parts around the splint.
Check for these things:

- **Numbness or tingling**: Your child should not have numbness or tingling. Have him wiggle his toes or fingers to increase blood flow.
- **Color**: Toes and fingers should be pink and warm. A foot or hand may have a slight “bluish” color if it has been below the level of the heart for a while. Raise the arm or leg, and recheck it in 20 minutes.
- **Temperature**: The fingers or toes may feel cool at first after the splint is applied. After this, they should be the same temperature as the rest of your child’s body.
- **Swelling**: The foot or the hand may appear swollen if it has been below the level of the heart for a while. Raise the arm or leg, and recheck it in 20 minutes.
- **Skin irritation**: Check the skin around the edges of the splint for redness or irritation. If your child’s skin is red or irritated, call your child’s doctor.
- If the skin below the elastic bandage stays too pale or feels cold to touch, the bandage might be too tight. Remove the bandage, and rewrap it. Check to see if the skin color and temperature returns to normal in 20 minutes. If not, remove the elastic bandage, and call your child’s doctor.

What else do I need to know?
Your child’s doctor may have you follow-up with an orthopedist (bone doctor).

When should I call the doctor?
Call your child’s doctor if your child has any of these:

- Increasing pain not relieved by acetaminophen or ibuprofen
- The splinted hand, arm, foot, leg or finger remains numb, swollen, painful, bluish in color or cold to touch 20 minutes after being raised.
- Fever over 100.3°F (or 38°C).
- Skin around the edges of the splint becomes red and irritated.
- The splint gets wet and does not dry well with a blow dryer set on the coolest setting.