

# Cast Care and Management



## Soft Cast or Hard Fiberglass Cast

### Why do we use casts?

Casts have been made to stretch tight muscles and tendons:

- ☐ \*to help improve the foot and ankle position so that your child can use braces.
- ☐ \*or to help improve the hand and arm position for better function.

### What safety rules should I follow?

Do checks every 2 hours for the first day the cast is put on, and 3 times a day afterwards.

- A. Blood flow: Press tip of toe/finger until it turns white, then release. Your child's usual color returns after 2-3 seconds.
- B. Temperature of toes/fingers: may change cool to warm but should not be icy cold.
- C. Swelling: If observed around cast, raise casted limb, massage the toes/fingers, and reassess in 30 mins.
- D. Numbness and Tingling (feeling pins and needles): Your child should not experience this feeling in the body part with the cast.

### When may the cast need to be removed?

Any of the above may require the cast to be removed. Call the outpatient Rehabilitation Department immediately during open hours. Speak to a casting therapist or the department manager.

- For a hard cast: If the Department is closed, go to a nearby emergency room and have the hard cast removed. Bring this form to the emergency room so the physician will know the reason for casting. **DO NOT** take off or trim hard cast on your own.
- For a soft cast: If you have been shown how to take off a soft-type cast, take the cast off and notify therapist. **You may only take off** a soft type cast if a medical professional shows you how to do it.
- For a split cast with straps: Take the cast off and try putting it on again after you've checked the skin for redness or rash.

## How do I take care of the cast at home?

### KEEP THE CAST DRY

Do not place the cast into water even with plastic cast cover. **DO NOT GET CAST WET** use sponge baths for bathing. A wet cast may lead to skin rash and the cast will not fit well.

### DISCOMFORT

Your child may feel mild ache from the stretching. This can be improved with acetaminophen (Tylenol). Check with your primary doctor first before using this or other medications. **DO NOT** take off the cast for minor complaints as treatment may take longer. Severe pain or fussiness (in younger children) that lasts more than an hour means a cast may need to be removed. If your child is not able to cope with the stretch, the casting series may not work and may need to be stopped.

### ITCHINESS

May be helped by gentle tapping on cast. **DO NOT** stick anything into the cast, as the skin may get hurt. Cover toe/finger area with socks to keep out anything which might fall into the cast, such as sand or dirt. If itching continues and is severe, call your pediatrician for medication.

### ACTIVITY

The casting therapist will give you a written on/off schedule if your child's cast has been split and strapped. If your child can usually walk, they may continue doing so in the stretching casts, unless your therapist tells you otherwise. Your therapist will give your child cast shoes to use for standing/walking. The cast shoes are for safety to prevent falls and cast breakdown.

Supervise child and do not allow them to kick or hit others with the casted body part. They could hurt themselves and others.

Please call during office hours if you have any concerns with safety checks, pain lasting over one hour that is not relieved by rest or medication, wet cast, or broken cast.

**Rehabilitation Services Department**  
**Office hours: Monday through Friday 8:00 a.m - 4:30 p.m.**  
**Main Telephone Number: 323-361-2118**  
**Hand Clinic: 323-361-4165**

THERAPIST \_\_\_\_\_

ASSISTANT \_\_\_\_\_

**\*References available upon request.**