

Guide To Cast or Splint Care

Why splints and casts? Your doctor has applied a cast or splint to support and protect injured bones, tendons, or ligaments. They are meant to keep the injured area in good alignment, reduce pain, swelling, and muscle spasm. In some cases, splints and casts are applied following surgery.

Types of splints and casts. Casts are custom-made and applied professionally. Casts can be made of plaster or fiberglass. Splints or half-casts also can be custom-made, especially if an exact fit is necessary. Other times, a ready-made splint may be used. These off-the-shelf splints, made in a variety of shapes and sizes, are much easier and faster to use. They often have Velcro straps, which make the splints easy to adjust and to put on and take off.

What materials are used? Fiberglass or plaster materials form the hard supportive layer in splints and casts. Fiberglass is lighter in weight and "breathes" better than plaster, and both materials come in strips or rolls. These materials are dipped in water, applied over a layer of cotton or synthetic padding covering the injured area. It takes about one hour for fiberglass and two to three days for plaster to harden.

Getting Used To the Splint or Cast

- Elevate your injured arm or leg above your heart by propping it up on pillows or some other support. You will have to recline if the splint or cast is on your leg. Elevation allows clear fluid and blood to drain "downhill" to your heart.
- If they are not included in the cast, move your fingers or toes gently and often to help decrease swelling.
- Apply ice to the splint or cast. Place the ice in a dry plastic bag and loosely wrap it around the splint or cast at the level of the injury. Ice that is packed in a rigid container and touches the cast at only one point will not be effective.

Warning signs following splint or cast application.

After application of a splint or cast, it is very important to elevate your injured arm or leg for 24 to 72 hours. The injured area should be elevated well above the heart. Rest and elevation greatly reduce pain and speed the healing process by minimizing early swelling.

If you experience any of the following warning signs, contact your doctor's office immediately for advice.

- Increased pain, which may be caused by swelling and a cast or splint that is too tight.
- Numbness and tingling in your hand or foot, which may be caused by too much pressure on the nerves.
- Burning and stinging, which may be caused by too much pressure on the skin.
- Excessive swelling below the cast, which may mean the cast is slowing your blood circulation.
- Loss of active movement of toes or fingers, which requires an urgent evaluation by your doctor.

Taking care of your splint or cast.

- After you have adjusted to your splint or cast for a few days, it is important to keep it in good condition. This will help your recovery.
- Keep your splint or cast dry. Moisture weakens plaster and damp padding next to the skin can cause irritation. Use two layers of plastic or purchase waterproof shields to keep your splint or cast dry while you shower or bathe.
- Do not walk on your cast unless instructed otherwise by your physician.
- Keep dirt, sand, and powder away from the inside of your splint or cast.
- Do not pull out the padding from your splint or cast.
- Do not stick objects such as coat hangers inside the splint or cast to scratch itching skin. Do not apply powders or deodorants to itching skin.
- Do not break off rough edges of the cast or trim the cast before asking your doctor.
- Inspect the skin around the cast. If your skin becomes red or raw around the cast, contact your doctor.

- Inspect the cast regularly. If it becomes cracked or develops soft spots, contact your doctor.