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#### Ashford Hospital

London Road  
Ashford, Middlesex  
TW15 3AA  
Tel: **01784 884488**

#### St. Peter's Hospital

Guildford Road  
Chertsey, Surrey  
KT16 0PZ.  
Tel: **01932 872000**

Website: [www.ashfordstpeters.nhs.uk](http://www.ashfordstpeters.nhs.uk)

# Care of a Plaster Cast

Rowley Bristow Orthopaedic Unit  
01932 723646



# What is a Plaster Cast?

A plaster is a gauze bandage that has been mixed with different resins. When mixed with water and applied, it then becomes hard. They can be known as Plaster of Paris or Synthetic plasters.

## What is the difference between a 'backslab' and a full cast?

A backslab is usually made from plaster of paris and does not completely encircle the whole limb. They are generally applied in Emergency departments and walk in centres. The main reason for not applying a full plaster cast is because swelling may increase in the days after an injury.

This type of plaster is usually temporary and will either be completed to a full plaster or changed to a new one.

A full plaster encircles the limb and only allows minimal swelling.

## How long does it take to dry?

A Plaster of Paris plaster cast can take up to 48 hours to dry completely.

A synthetic plaster takes up to 30 minutes.

Plaster instructions given verbally and written.  
Name and Signature of Patient/Carer/ Parent/Guardian:

Name and Signature of member of Staff:

Date:

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## Further Information

We endeavour to provide an excellent service at all times, but should you have any concerns please, in the first instance, raise these with the Matron, Senior Nurse or Manager on duty.

If they cannot resolve your concern, please contact our Patient Experience Team on 01932 723553 or email [patient.advice@asph.nhs.uk](mailto:patient.advice@asph.nhs.uk). If you remain concerned, the team can also advise upon how to make a formal complaint.

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Author: L Buckle

Department: Orthopaedics and Trauma

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developing a DVT from being less mobile, surgery or traveling long distance.

Fractures and lower limb plaster casts are associated with having a risk of developing a DVT, although the risk is small. If you have any known risk factors such as; smoking, previous DVT or PE, faulty blood clotting etc. then please inform your doctor so that they can assess your risk of developing a DVT and can advise you regarding preventative treatment. If you are at high risk of developing a DVT you may be given tablets which thin your blood or injections.

It is important that you eat a healthy diet and drink plenty of fluids; this is to help with bone and wound healing.

Smoking is not advised as it can prevent / slow down bone and wound healing.

Please help us with your care by looking after your plaster as it is an essential part of your treatment plan.

Any problems or concerns about your plaster, please don't hesitate to contact the Fracture Clinic **01932 723646** between the hours of 9-5 Monday-Friday.

Out of these hours and at weekends, if you have any problems you will need to go to Accident and Emergency of Walk in Centre.

**Do not** leave problems longer than 24 hours to seek medical attention.

### Things to do:

- Exercise joints: fingers / toes – this is to stop stiffness where possible
- Keep your plaster dry
- Wear the plaster shoe that is provided (only if able to weight bear on the plaster)
- Use mobility aids (crutches / frames) as instructed. Please return to us if they are no longer needed
- Keep the limb elevated. For arm cast – keep it across your waist or chest  
Leg cast – higher than your bottom for 50 minutes of every hour and being up with walking aid for 10 minutes. If able to weight bear you should keep the leg elevated for 40 minutes and 20 minutes walking
- Remove rings

### Do not:

- Put anything in your plaster to scratch yourself – this can cause a serious infection
- Leave your limb unsupported or stand for long periods, even if you are allowed to full weight bear
- Trim or cut your plaster
- Get the plaster wet. It may disintegrate or make it soggy inside which can lead to skin problems.

## **When should I contact the Plaster Room?**

- If the plaster has become too tight/too loose/cracked or becomes soft
- Marked swelling of fingers / toes (we expect some swelling after an injury)
- Numbness
- Pins and needles (that last more than 1 hour)
- Increased pain
- Discoloration of fingers / toes
- Not able to move fingers / toes

You should raise the affected limb and take some pain relief, if symptoms do not improve please call the Unit.

## **Can I get it wet?**

No. You should never allow your plaster to become wet as this will make it weak and less effective. Some rain splashes should be ok, but never submerge into water.

## **Can I walk on my plaster?**

This will be advised by the doctors and nurses. If you are able to fully weight bear a plaster shoe will be provided and instructions given.

## **Can I drive?**

We strongly advise that you do not drive with any type of plaster. Advice should always be taken from the doctor / nurse and your insurance provider.

## **Can I fly?**

This will depend on the injury that you have sustained and how long it has been since the injury.

To fly in a plaster cast, it should be split and wrapped in a bandage and advice given to how to remove the cast in an emergency.

## **Exercises**

### **Arm cast:**

- Bend and stretch your fingers to the knuckles (at least 5 times an hour)
- Bend and straighten your elbow (only if plaster is below the elbow)
- Rotate your shoulder (only if no other injuries to your shoulder)

### **Leg cast:**

- Wiggle your toes
- Bend and straighten your knee (only if plaster is below the knee)

## **What is a Deep Vein Thrombosis (DVT)?**

In the body, blood clots naturally after a cut/injury. It is the body's way to prevent you losing too much blood. You are more at risk of