

For below knee casts only

Regularly bend your knee. Sit down, bend your knee and then straighten your knee. Repeat ten times.



Lie on your tummy on the bed and bend your knee, bringing your heel towards your bottom. Slowly lower your foot back down to the bed, keeping the movement slow and controlled.

Lie on your bed or sit up with your leg raised. Keeping your leg straight, brace the knee and keeping the leg straight, lift the whole leg up approximately 5 cm, hold for five seconds then slowly lower it down again.

PALS

The Patient Advice and Liaison Service (PALS) is a service that offers support, information and assistance to patients, relatives and visitors. They can also provide help and advice if you have a concern or complaint that staff have not been able to resolve for you.

The PALS office is in the main hospital foyer at PRUH and they would be happy to advise you. Contact details below:

Tel: 01689 863252

Email: kch-tr.palskent@nhs.net

PALS at Princess Royal University Hospital
Farnborough Common
Orpington
Kent BR6 8ND

You can also contact us by using our online form at www.kch.nhs.uk/contact/pals

If you would like the information in this leaflet in a different language or format, please contact PALS on 020 3299 1844.

Plaster cast care

Information for patients at Princess Royal University Hospital only

This leaflet explains important information about the care of your plaster cast and about the risk of venous thromboembolism (VTE).

For help and advice with your cast please contact:

The Plaster Room: **020 3299 2386**

Location: Suite 1, Golden Jubilee Wing

Between: 9am – 5pm

Or out of hours: 020 3299 3937

Confirming your identity

Before you have a treatment or procedure, our staff will ask you your **name and date of birth** and check your **ID band**. If you don't have an ID band we will also ask you to confirm your address.

If we don't ask these questions, then please ask us to check.
Ensuring your safety is our primary concern.

Care of your cast

Contact the hospital (using the numbers on the front of the leaflet) if:

- The plaster is uncomfortable
- The cast becomes painful or is rubbing the skin anywhere
- The plaster does not fit well or the plaster becomes soft, cracks or gets wet
- You notice an offensive smell or staining through the plaster.

Go to your nearest Emergency Department at once if:

- Your fingers/toes become numb, blue, very cold or swollen and they do not get better even if you keep them raised for a while
- You are unable to move your fingers or toes or have the sensation of pins and needles that does not go away
- You have intense pain which is not relieved when the limb is raised
- You develop sudden shortness of breath, chest pain or cough up blood.

You should:

- Keep the limb raised as much as possible to help reduce swelling
- When walking with an arm cast, keep your fingers above the level of your elbow
- When sitting with a leg cast, keep the leg raised so that the foot is higher than your hip
- Regularly exercise your fingers or toes if possible.

You should not:

- Get the plaster wet
- Walk on the plaster unless you have been told you can do so. If you have a weight-bearing cast, wear the shoe provided indoors and outdoors
- Expose the cast to a source of heat
- Scratch the skin beneath the cast or poke anything inside
- Wear jewellery on the limb on which the cast has been applied.

The risk of blood clots and plaster casts

Most people in plaster casts do not go on to develop blood clots. However, plaster casts can increase the risk of blood clots forming in the veins. These clots can block the flow of blood and cause pain and swelling. This is known as a deep vein thrombosis (DVT). Occasionally, the clot can travel through your circulation and reach the lungs. This is called a pulmonary embolism and can cause coughing (sometimes with blood), chest pain and breathlessness. It can be dangerous and needs urgent treatment.

If you have any of these symptoms you should return to the Emergency Department immediately.

How can I reduce the risk of developing a DVT?

Some people have a higher risk of developing clots. Your doctor may recommend preventive treatment in the form of injections. If any of the following apply to you, please inform a member of the healthcare team:

- You have ever had a DVT or PE
- You are on cancer treatment or have a current cancer diagnosis
- You are pregnant (or if you gave birth fewer than 6 weeks ago)
- You have injured your Achilles' tendon.

It is difficult to predict who will get a blood clot, and there are steps that can be taken to try and reduce this risk:

- Drink plenty of fluids
- Mobilise as much as is comfortable
- Stop smoking (if you smoke) - this will also help your bone to heal
- Perform the exercises described below.

Exercises for reducing the risk of DVT in lower limb casts

While you have to wear a cast, any activity which promotes contraction of muscles and increased blood flow is helpful.

Try and do the following at least 3 times a day

For any cast on the legs

Wiggle your toes while lying in bed or whilst sat up with your leg elevated. Try and do this for at least 10 seconds and as often as you can. This promotes blood flow and can help reduce the risk of blood clotting.



Inside the plaster cast, if it is safe to do so, try and move your ankle up and down. It will not move very much as the cast will stop it. Repeat 10 times. If the cast feels loose or is rubbing, contact the hospital using the numbers on the front of the leaflet.

