



# If you require a special edition of this leaflet

This leaflet is available in large print. Arrangements can also be made on request for it to be explained in your preferred language. Please contact the Patient Advice and Liaison Service (PALS) email: rjah.pals.office@nhs.net

#### Feedback

Tell us what you think of our patient information leaflet. Please send your comments to the Patient Advice and Liaison Service (PALS) email: rjah.pals.office@nhs.net

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The Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust, Oswestry, Shropshire SY10 7AG Tel: 01691 404000 www.rjah.nhs.uk Information for patients

Serial Casting Treatment



**Alice Ward** 



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Your child's consultant has prescribed a serial casting treatment to help stretch out their tight calf muscle so that their foot can go flatter to the floor. Different things can cause this to happen but the treatment is the same.

The cast is changed every 2 weeks for about 6 weeks, but this can vary according to progress.

## Tips for plaster care:

- The plaster will be dry in around 30 minutes.
- The plaster must be kept clean and dry.
- A special shoe will be supplied to wear over the plaster so it can be walked on.
- Do not put anything down the plaster as it can damage the skin.
- During the treatment, if requested by the consultant, your child may need to be cast for a splint to maintain correction. This will be organised to be carried out during the appointment.
- Your child is encouraged to walk during this treatment and carry on as normal with limited activities, unless told otherwise.
- It is normal to have some discomfort for the first few days due to the muscle and tendons stretching. If your child has a lot of pain or this does not settle, please contact the number provided.

### DO's and DON'Ts

- DO exercise the joints not held in the cast as much as possible.
- DO elevate as much as possible, especially during the first few days.
- DO NOT let the limb hang down. Keep elevated when not walking.
- **DO NOT** put anything inside the cast to scratch. Plasters can sometimes cause itchiness, this will settle.
- DO NOT attempt to dry cast with hair dryers etc. if it gets wet, contact us ASAP
- **DO NOT** sit close to a fire or in direct sunlight as your cast may become hot and cause burns.
- DO NOT get the cast wet as it may disintegrate or cause skin problems.
- DO NOT try to adjust the cast yourself
- DO NOT remove any padding (this is there to protect the skin)

#### When to contact us.

## Contact us URGENTLY in the event of any of the following:

- Toes / fingers become blue or swollen
- Limbs become painful
- You have pins and needles / numbness
- Blister-like pain or rubbing under the cast
- Discharge, wetness or swelling under the cast
- Object put inside cast (or suspected)
- Skin around cast becomes red and raw
- Cast appears cracked, soft, loose or tight.

If you have any urgent problems/queries please contact:

Children's Outpatients: 01691 404510

Alice Ward: 01691 404444

For any non-urgent enquiries please email: rjah.ctev@nhs.net

If the cast needs removing we would normally ask you to return to clinic. In the event of it needing to be removed locally, this letter will allow that to happen.

#### Dear Sir/Madam,

This patient has a stretching cast on their leg because of a tight calf muscle. If they present to your department because of pain or other symptoms, we give you permission for the cast to be removed and the leg to be left without a cast. We will arrange an appointment for further treatment at the Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust.

Signed:	Date:
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## Removal of cast:

When the cast needs to be removed, dependant on the material used, an electric saw is used. The saw vibrates and makes a loud noise but does not rotate. The blade will only cut the hard exterior of the cast, not the soft padding. To prepare your child, there are videos on YouTube that they could watch. They may also want to wear headphones if they are sensitive to noise.

Once the cast is off, the limb will feel light, stiff and weak. This should improve as your child goes about their normal activities.