



## CASTS AND CAST CARE

*Understand your condition.  
Know your next steps.*

### ***Role and purpose of a cast***

Casts are used primarily for treating broken bones but can also help in the treatment of ligament or tendon injuries. A cast is full-time protection and support while the injury heals and should not be modified or removed unless your specialist approves. Casts are commonly applied to prevent movement of the joint above and below the break, controlling the bone position while healing. Keeping the broken bone from moving while holding the proper position not only helps avoid delayed healing but also helps minimize your pain. Pain, muscle cramps, and swelling are usually gone before the broken bone has completely healed, but the cast will need to remain in place until your specialist feels it is safe for removal. Casts may be cumbersome, but they are an essential component for a safe and more predictable recovery from surgery or injury.

### ***What cast material does Summit use?***

Summit primarily uses fiberglass casts. They are lighter weight, fast-setting, and more durable if cared for properly. Fiberglass is fully hardened in about 30 minutes compared to plaster, which takes several hours to dry. Fiberglass is less obstructive with X-rays, allowing your specialist to better monitor your healing process.

### ***“Waterproof” vs. non-waterproof casts:***

Waterproof is an overstatement when it comes to casts. Water-resistant is more accurate. A truly water-resistant cast starts with a special water-resistant wrap applied to the skin followed by the fiberglass cast material. Even with a water-resistant cast, you will need to take steps to help the skin dry as much as possible to avoid skin complications. Regular casts, which use cotton-based padding, absorb water and will not dry out. This creates problems like mold, skin breakdown, and even infection. In this case it is very important to keep the cast dry.

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## *May I go swimming with my “waterproof” cast?*

If your specialist has approved swimming in your cast, you can enjoy swimming in a pool, but steer clear of lakes, ponds, oceans, or other natural bodies of water. This natural water can have microbes or other bacteria that can cause issues for your skin or increase risk of infection.

Pool chlorine can get trapped between the cast’s liner and the skin and can irritate the skin below the waterproof cast when drying.

- » **Keep it to 2-3 hours max.** Staying in a pool for long durations of time can eventually cause the waterproof cast to break down.
- » **Rinse it out.** If you want to go swimming in a pool with your waterproof cast, we recommend you rinse the space between the skin and the cast with tap water for about 10 minutes to get all the chlorine out.
- » **Enlist your hair dryer.** On the cool setting, you can run a hair dryer over the cast to improve dry time.
- » **Know when to contact your specialist team.** If you notice a rash or the cast is not dry even after 24 hours, call your Summit specialist team or after-hours on-call specialist for next steps.

## *How do I shower or bathe with a cast?*

**Waterproof cast:** If you have a waterproof cast, then you can bathe and shower as normal. Make sure to run clean water through your cast after bathing or showering to make sure any residual soap is out. Soap that is not rinsed out can become a source of itchiness. Make sure the cast is completely dry before getting it wet again.

**Non-waterproof cast:** There are a couple of options to protect a non-waterproof cast when showering:

- » You can purchase a reusable cast protector from your local pharmacy or online. It will seal the area and prevent water from getting in.
- » Use Saran Wrap or a plastic bag, such as a small trash bag. First double-check for any holes. Then use a strong rubber band to secure the top and bottom. Do not submerge the cast.

Even with protective covers, it is best to keep your cast away from direct shower spray.

## *How should I remain active with a cast?*

The best advice is this: If it’s not in the cast, it should be moving. Exercise those muscles around the cast area that are not immobilized (held in place by the cast). For example, if you have a wrist cast, you should still be moving your fingers, elbow, and shoulder normally.

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Maintain all unaffected joint movements with gentle, normal activity. Avoid heavy lifting, pushing, or pulling while in a cast, as well as impact activities. If it causes pain, do not continue the activity.

### ***Why do I have to wait to get a cast?***

Severe swelling is the primary reason for not casting an injury immediately. In many, but not all cases, an injury is known to cause severe swelling that cannot be tolerated in a cast. As a solid cylinder around your extremity, a cast does not allow for the expansion of swelling like our skin. Skin, muscle, and nerve damage may occur if this pressure is trapped in a cast. In these cases, a provider may choose to use alternative immobilization, such as a splint, sling, or wraps until the initial swelling begins to reduce. Proper elevation is an extremely important part of minimizing and reducing swelling from day one.

### ***Why and how should I elevate?***

Elevation for all injuries involving an arm or leg is an important part of your treatment and recovery. Elevation reduces swelling caused by an injury or surgery. Reducing swelling helps avoid tissue damage and relieves pain caused by the added internal pressure on the muscles, nerves, soft tissue, and skin. The end result is less swelling, less tissue damage, less pain, and less need for strong pain medications.

Proper elevation is raising the affected extremity to heart level or higher. Leg elevation: Keep your foot resting on the back of the couch when lying down (not sitting up). Arm elevation: Sitting up, rest your elbow on a large pillow in your lap with your fingers/hand pointing to the ceiling. Discuss this further with your provider for a more detailed explanation and demonstrations.

### **QUESTIONS TO ASK WHEN YOU GET A CAST**

- » Do I have a “waterproof” or non-waterproof cast?
- » May I go swimming?
- » How do I protect my cast when I shower/bathe?
- » When may I put weight on it, and how much?  
(In medical terminology, this is referred to as weight-bearing.)
- » When will the cast be removed?

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## ***What if my cast feels tight?***

A cast should feel snug or reasonably tight for the first 24 to 48 hours after application. The cast should not become tight enough to cause increasing pain. First, be sure you maintain elevation nearly nonstop and use proper technique. If this is not helping, please contact your specialist team or the on-call team for further direction.

## ***If your skin itches under the cast***

Do not scratch under your cast with anything. While this is tempting for almost everyone who gets a cast, it may break the skin and cause infection.

There are a few tips you can try to help relieve itchiness:

- » Use a hair dryer pointed under the cast, using the cool setting.
- » An over-the-counter oral antihistamine, such as Benadryl® (diphenhydramine) or Claritin® (loratadine).
- » An ice pack wrapped in a thin towel will cool down a warm limb and decrease sweating.

## ***When to call your Summit specialist team***

- » If your cast feels too snug or tight. **Note:** *Swelling around the injury is common and can cause a cast to feel tight for the first 48 hours.*
- » For “waterproof” casts, if your cast does not dry.
- » If you have continued coldness or discoloration of your casted limb.
- » Any pain, numbness, or continued tingling in fingers or toes of the casted limb.
- » If your skin becomes red or raw, or emits a bad odor.
- » If you feel a blister or sore developing inside the cast. This can feel like a constant, burning sensation in the same area.
- » If your cast has cracks or soft spots, or becomes loose.
- » The cast becomes excessively soiled.
- » If you develop a fever.

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