

Patient's Plaster Passport

Please bring this with you for every appointment

PLASTER ROOM PHONE NUMBERS
PRESTON 01772 523349.
CHORLEY 01257 245798.

INSERT PATIENT INFORMATION
STICKER HERE

PLASTER CAST DETAILS

TYPE OF CAST	
DIAGNOSIS	
TREATMENT	
MANIPULATED	YES NO
COMMENTS	
PRINT NAME	
SIGN	
DESIGNATION	
REVIEW DATE	
SKIN AT RISK	YES NO
HAS THE RISK OF PRESSURE DAMAGE BEEN EXPLAINED TO PATIENT	YES NO
VTE GIVEN	YES NO
SIGN	

SUBSEQUENT CAST CHANGES:

DATE	
TYPE OF CAST	
REASON FOR CHANGE	
PROBLEM SKIN CHECK	
COMMENTS	
PRINT NAME	
SIGN	
DESIGNATION	
DATE OF NEXT REVIEW	

SUBSEQUENT CAST CHANGES:

DATE	
TYPE OF CAST	
REASON FOR CHANGE	
PROBLEM SKIN CHECK	
COMMENTS	
PRINT NAME	
SIGN	
DESIGNATION	
DATE OF NEXT REVIEW	

NOTES:

VIRTUAL FRACTURE CLINIC (VFC) PATIENT INFORMATION – OUTPATIENTS ONLY:

What is virtual fracture clinic (VFC)?

You have been referred to our 'VFC'. This clinic is a virtual clinic where patients with bone and soft tissue injuries are referred who do not need immediate admission to hospital.

Do I need to attend a clinic appointment?

You are not physically required to attend this clinic, but within 48-72 hours of your attendance at the Emergency Department, your x-rays and documents will be reviewed by a senior orthopaedic doctor. You will then be contacted by our nurses and a plan will be proposed for the management of your injuries. It is important you ensure that your contact details are kept up to date on our system when you attend the Emergency Department.

What happens next?

Most of our patients referred through 'VFC' can be safely managed with self-care at home under our advice. Some patients will be referred to other services such as Physiotherapy or Hand Therapy. Some patients may be asked to come to our clinic for a face-to-face assessment. Very occasionally, surgery may be advised, and you will usually be offered a face-to-face appointment to discuss this further if this is the case.

What happens if I have not been contacted within a few days?

Our 'VFC' runs from Monday to Friday and our staff are generally very busy. Please allow 48-72 hours after your attendance at the Emergency Department before contacting us. If you have not been contacted by us after 72 hours, it is important that you contact us on one of the following telephone numbers:

01772 522002

01772 523669

01772 524463

01257 247307

What if I have been virtually assessed and I still have problems:

Some patients will still have ongoing problems, questions, or concerns despite being assessed in 'VFC'. We encourage patients to contact us in the event of any of these situations on the following telephone numbers so we can address any issues early on:

01772 522002

01772 544463

Instructions for after the application of a Plaster:

- Normally, fibreglass casts are dry in 30 minutes to an hour after application. Plaster of Paris takes approximately 24 to 48 hours to dry
- Keep the plastered limb elevated for 48 hours after application
- Do not get the cast wet unless instructed otherwise
- Do not walk on the cast unless instructed otherwise
- Do not push anything down the cast to scratch an itch
- Do not drive with the cast on until you have consulted your insurance provider
- A cast shoe must be used if a walking cast is on
- If your fingers or toes become swollen, painful, blue, or cold, elevate the limb and report to the Emergency Department (ED) at

once these symptoms indicate that the cast is too tight and needs to be replaced/loosened

- If you have a cast on and are planning to fly, we advise you to check if your airline provider will allow this

Returning to have your cast checked:

You may be asked to return the day after your cast is applied so that it can be checked. Unless advised otherwise, the times for plaster checks are as follows:

- Chorley – Monday to Friday, 14:00 to 16:00. Weekends and bank holidays as arranged
- Preston – Monday to Friday 09:00 to 17:00. Weekends and bank holidays 14:00 to 17:00

If you cannot attend during the indicated times above, please discuss this with a plaster technician or nurse.

Pressure Ulcers from Medical Devices

What is a pressure ulcer and how do they develop?

A pressure ulcer is a localised injury to the skin and/or underlying tissues, usually over a bony prominence, because of pressure. Pressure ulcers can develop when pressure is applied to an area of the skin over a period. The extra pressure disrupts the flow of blood through the skin. Without a blood supply, the skin becomes starved of oxygen and nutrients and begin to breakdown.

Who is at risk of developing pressure ulcers?

People are at risk of developing pressure ulcers if they have difficulty moving and are therefore unable to easily change position whilst seated or in bed. Therefore, the risk of developing a pressure ulcer under a plaster cast is increased due to immobility.

To reduce the risk, we advise:

- Move the limb with the cast, or your body frequently
- Ensure the top and bottom of the cast is not rubbing on the skin
- Ensure all fingers and toes can move
- Regularly change position, turning every two hours
- If you have a leg cast in situ and are turning onto your side, place a pillow in between your knees to prevent the cast from rubbing on your other leg
- Do not rest a plastered leg on a heel for long periods. To relieve pressure from the heel, place a pillow length way so that the heel is raised and free from pressure

Symptoms to look out for:

If you experience any of the following pressure ulcer related symptoms, contact the Fracture Clinic or Emergency Department immediately:

- Rubbing or blister like pain, or any discomfort from within the cast
- Wetness or stickiness inside the cast
- If the cast develops a smell
- Staining on the outside of the cast
- Areas of pain or localised heat

DO NOT WAIT FOR YOUR NEXT APPOINTMENT IF YOU HAVE ANY CONCERNS CONTACT THE PLASTER ROOM IMMEDIATELY

Further advise and instructions for patients with plaster casts on the lower limbs:

On rare occasions, symptoms of swollen, painful, blue or cold toes might suggest the development of a clot in the veins of a lower limb (Deep Vein Thrombosis/DVT). This is a rare but a recognised complication of lower limb immobilisation. The nurse practitioner or doctor will be able to tell you whether it is likely that you may develop a DVT or not.

A percentage of patients developing a DVT will go onto develop a more serious complication known as a Pulmonary Embolism/PE. This occurs when a clot that has formed in the leg vein breaks off and becomes lodged in the blood vessels within the lung.

If you experience chest pain or breathlessness, you must report back to the Emergency Department immediately for further assessment, examination and investigation.

Appointments

Sources of further information

www.lancsteachinghospitals.nhs.uk

www.nhs.uk

www.accessable.co.uk

www.patient.co.uk

All our patient information leaflets are available on our website for patients to access and download:

www.lancsteachinghospitals.nhs.uk/patient-information-leaflets

Lancashire Teaching Hospitals NHS Foundation Trust is not responsible for the content of external internet sites.

Lancashire Teaching Hospitals is a smoke-free site. Smoking is not permitted anywhere on any of our premises, either inside or outside the buildings. Our staff will ask you about your smoking status when you come to hospital and will offer you support and advice about stopping smoking this will include Nicotine Replacement Therapy to help manage

your symptoms of withdrawal and the opportunity to speak to a nurse or advisor from the specialist Tobacco and Alcohol Care Team.

If you want to stop smoking, you can also contact Smokefree Lancashire on Freephone **08081962638**

Please ask a member of staff if you would like help in understanding this information.

This information can be made available in large print, audio, Braille and in other languages.

Our patient information group review our leaflets regularly, if you feel you would like to feedback on this information or join our reading group please contact on email address:

patientexperienceandinvolem@LTHTR.nhs.uk

Department: Orthopaedics

Division: Surgery

Production date: February 2025

Review date: February 2028

JR 1245 v1