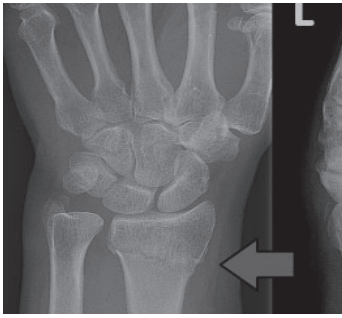




Plaster Cast Instructions

Wrist Fracture

Your wrist consists of 2 bones. Your radius and ulna. When you fracture or break your wrist it can involve one or both of these bones. The decision has been made to manage your wrist in a cast at present. Following this type of injury you may never gain full movement back in your wrist but you will be able to use it functionally.

What can I expect?

- You will be in cast for 4-6 weeks, depending on your injury. Following this you may go into a splint, but this is not routine practice.
- In this time your cast may be changed as required.
- Your cast should be well fitting but not so tight that it is causing discomfort or sensory changes in your hand.
- You should take analgesia, as required, to manage your pain.

You will be expected to follow the exercises and instructions below.

Smoking

Medical evidence suggests that smoking prolongs fracture healing time. Stopping smoking during the healing phase of your fracture will ensure optimal recovery. If you require advice or assistance to stop smoking, go to <http://smokefree.nhs.uk> or discuss with your GP.

You may return to driving once you have the movement in your wrist needed to operate the car and when you can perform an emergency stop without hesitation.

Caution

If your plaster becomes too tight, your swelling increases, you develop constant pins and needles or you have increased pain, please attend to the Plaster Room

Mon - Fri 9am - 5pm, or A&E at any time.

If you have any other concerns please contact the Fracture Nurse on 07779 422980.

Exercises

You should try these exercises 4 times a day. Do each exercise 10 times.

Elevate your arm while resting



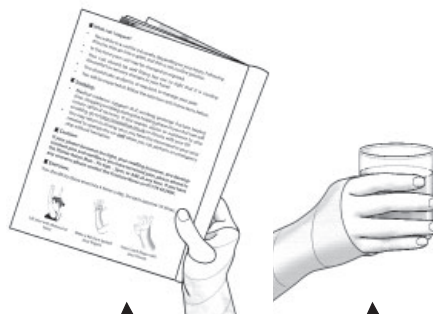
Lift your arm above your head



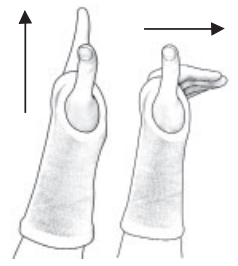
Bend and straighten your elbow: 5 times



Touch each finger with your thumb



Use your hand for light activities



Start with all your fingers straight and then bend the knuckle joints of all your fingers, keeping them straight

Plaster Cast Instructions: Wrist Fracture

Do

- Keep your hand raised above your elbow as much as you can for the first week. This will help any swelling to go down.
- Do the exercises as demonstrated on this leaflet.
- Use painkillers if you experience any pain.
- You can usually return to school or work with a cast, but you should avoid strenuous activities that may damage the broken bone or cast.

Don't

- Don't get your plaster cast wet. This will weaken it and your bone will no longer be properly supported. (It's possible to buy special covers for plaster casts to keep them dry when washing or bathing. Ask your local pharmacist for more information. Don't try to use plastic bags, bin liners, cling film or similar to keep the cast dry, as these are not reliable methods).
- If your cast gets wet, contact your hospital or minor injuries unit for advice as soon as possible.
- Always remove any covering as soon as you can to avoid causing sweating, which could also damage the cast.
- Even if the plaster cast makes your skin feel very itchy, don't poke anything underneath it. This could cause a nasty sore and lead to infection.
- Avoid getting small objects, powders and sprays inside your cast, as they could irritate your skin.
- Don't try to alter the length or position of your cast.
- Don't lift anything heavy or drive until the cast has been removed.

Contact us for Advice if:

- Your plaster cast still feels too tight after keeping it elevated for 24 hours.
- You experience persistent itching or a burning sensation under the cast.
- You notice an increase in swelling or an increase in pain.
- You notice tingling or numbness.
- Your fingers turn blue or white.
- Your cast feels too loose.
- Your cast is broken or cracked.
- The skin underneath or around the edge of your cast feels sore.
- There is an unpleasant smell or discharge coming from your cast.

Contact details:

Raigmore Hospital
Old Perth Road,
Inverness, IV12 3UJ.
Tel: 01463 704000 ext:4294

Tel:

Fracture Clinic Helpline

Monday to Friday

12 - 3 pm
07779 422980

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