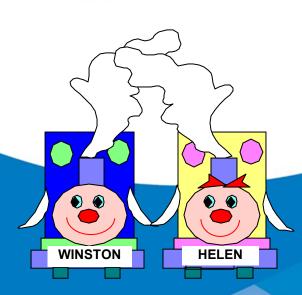


Manipulation under general anaesthetic and care of plaster of paris

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如有需要,本传单可提供其他语言/版式 此單張的其他語言/格式版本可按要求提供

Na żądanie ta ulotka może zostać udostępniona w innych językach/formatach.



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Reasons for the Procedure

An injury to a limb can cause a bone to come out of a joint (dislocation), or cause a break in the bone (fracture.) A child with a broken bone will be unable to move the affected part. There will be swelling and sometimes obvious deformity. Your child will also be in some pain. An X-ray will be taken to tell us exactly what is broken.

Nature of the Procedure

Under anaesthetic the dislocated bone can be manipulated back into the joint and, in the case of a fracture, the two ends of the bone are brought back together. A simple fracture may only need some splinting to support it while it "knits" together. A more severe fracture may require surgery to pin the bones together.

Benefits of the Procedure

Your child's limb will be temporarily supported in a sling, collar and cuff or back slab. This will help prevent it from moving. Your child may not go to theatre immediately as she/he needs to fast for up to 6 hours.

Risks of the Procedure

Every operation carries a risk of complications, but this is very small. These complications will be discussed with you before you sign the consent form. This is your opportunity to ask the surgeon any questions you may have about the operation.

Discomforts of the Procedure

After an anaesthetic your child could feel sick and vomit, have a headache, sore throat or feel dizzy. These effects are short-lived.

Consequences of not having the Procedure

Your child will experience a lot of pain as the bones are not supported in the correct position.

There will be a deformity in the shape of the arm or leg.

Plaster of Paris

This is a chalky white substance which is soaked in water and then moulded around the limb once the bones are in position. Once this is applied a further X-ray is taken. When your child returns from theatre, the affected limb will be raised on pillows to help prevent any swelling. Your child will be encouraged to move and then exercise his/her fingers or toes to prevent stiffening of the joints.

The limb is observed for any blueness or pain which could mean the plaster is too tight.

After Discharge

It is important to let the plaster dry naturally, this can take a few hours. In this time minimal handling is necessary so as not to damage it. If it is a leg in plaster, the physiotherapist will need to assess your child and, where necessary, teach him/her to use crutches before you can take your child home.

At home your child may have some discomfort. Medicines given to you for your child and the doses specified should ease the pain. Please follow instructions on the bottle.

Encourage your child to exercise all the joints that are not in the plaster cast, for instance, fingers or toes. Keep the limb raised, this will boost blood circulation and lessen the chance of any swelling.

Do not let the plaster get wet !!

Do not put anything inside the plaster cast. This could irritate the skin and cause infection. This includes talcum powder or creams.

Do not cut or heat the plaster. If the plaster is uncomfortable, rubbing or digging in, contact the hospital.

What to do if you have a problem

If you have any of the problems listed below, please contact:

Ward 4F on 0151 430 1791

- Fingers or toes become swollen and do not return to normal when the limb is raised
- Fingers or toes turn white or blue and feel cold to touch
- Your child complains of pins and needles, numbness or severe pain
- The plaster cast starts to smell
- The plaster cast becomes loose, cracks or breaks

If it is your child's leg that is in plaster and you are going to find it difficult to get about, the nurse will be able to provide you with a contact number for the loan of a wheelchair. Your child may need to be seen by the physio team prior to discharge if crutches are needed to aid walking. They will need to ensure your child can use them safely before going home.

Your child's doctor will be able to advise you on when they can go back to school and when follow up will be after going home.

If you have any further questions, please contact your child's consultant via their secretary via the hospital switchboard. The secretaries are available Monday to Friday 9.00 am to 5.00 pm

If you need to contact the department outside of these hours, please phone either:

Ward 3F 0151 430 1616 Ward 4F 0151 430 1791

Whiston Hospital Warrington Road, Prescot, Merseyside, L35 5DR Telephone: 0151 426 1600

