Accident and Emergency Department **New Territories West Cluster** **Hospital Authority** **Fact Sheet** Cast Application (POP) Version No. 2007/08	Name of Patient : HKID No. Sex : Male / Female Age : Date of Birth : HN :

Introduction

The objective of Plaster of Paris (POP) or synthetic cast application is to immobilize the injured limb in a specific position in order to promote healing of bony fractures and soft tissue injuries. Your doctor will discuss with you about the possible risks, complications, and other treatment options. For further queries, please contact your doctor.

Risks & Complications

1. Compartment syndrome
2. Pressure sores
3. Wound infection
4. Joint stiffness
5. Burn injury of skin
6. Neurological injuries

POP care

(Before POP is completely set)

1. It is normal to feel mild warm sensation during the process of POP cast application.
2. DO NOT put the POP on a hard surface or use hard objects to strike it.
3. DO NOT walk on the POP, or move the joints held within the POP cast.
4. DO NOT expose the POP to heat or hot air.
5. Rest in a cool place for POP to dry naturally.
6. It may take 2-3 hours for the surface of the POP to dry, and 48-72 hours for it to dry completely (Synthetic cast usually takes 15-30 min to dry).

(After it has dried up completely)

1. AVOID getting it wet; you may wrap it with a plastic bag when necessary.
2. The injured part should be elevated to prevent or reduce swelling. This is especially important in the first few days.
3. DO NOT flow fluid or put hard object into the POP. If it gets wet accidentally, you can dry it with a hair-dryer using cool air.
4. DO NOT walk on your POP unless a walking heel has been fitted.
5. Actively mobilize the joints not included in the POP cast. This will help reduce swelling and promote recovery.
6. Keep your follow-up appointment. DO NOT modify or remove the POP cast by yourself.

Come back IMMEDIATELY if you experience any of the following:

1. Severe or persistent pain
2. Weakness, tingling or numbness over the distal part of the extremities or the limbs become swollen, bluish or pale
3. Foul smelling or purulent discharge from the inside of the POP cast especially if there is a wound within the POP
4. When the POP is broken, too tight or too loose