

## **Caring for your child in a hip spica cast**

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Your child may need a hip spica cast after:

- treatment for a dislocated hip
- treatment for a broken thigh bone
- orthopedic surgery

The cast keeps your child's hips and legs in the correct position and prevents any movement during healing.

The cast covers the middle of the body and down one or both legs, sometimes including the feet. The cast is made of soft padding, covered by fiberglass or plaster.



### **How do I care for my child?**

#### **Protect your child's skin**

- Check your child's skin around all the edges of the cast. The edges of the cast should not be sharp or dig in anywhere. When you turn your child, look for any areas that are red or sore as this may be a sign of skin breakdown from pressure.
- It is important for your child to turn over frequently during the day, every few hours if possible. Turning from stomach to back, then from back to stomach and so on. Be careful not to push or pull the leg in the cast if turning your child. Your child may turn less often during the night, but do not go more than 6 hours without changing position.

## Changing diapers or toileting

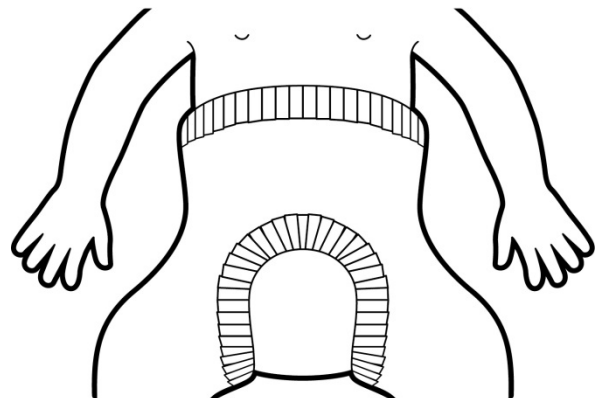
- If diapered, use 2 diapers to keep your child's cast dry. A small diaper must be well tucked in to the front and back of the cast. A larger diaper is worn over the cast.
- Change diapers very often. They should be changed as soon as they get wet or soiled. If the cast gets soaked with urine it will harm the skin and give off a bad smell.
- If your child is toilet trained, cover the cast edge at the back with plastic wrap, well up into the cast. Then roll your child onto a slipper bedpan.
  - For a girl, place a handful of toilet paper where it will catch the urine and drop into the pan. Raise your child's head and shoulders when they are on the bedpan to help prevent urine from getting on the cast. When finished, wash and dry your child's skin and throw away the plastic wrap.
  - Boys can pee into a container called a urinal.

## Check that the cast is not too tight:

1. Your child's toenails should not look blue.
2. Your child should be able to move his or her toes.
3. Your child's toes and feet should feel warm.
4. The warmth, colour, movement and size of the toes and feet of both legs should be the same.
5. Your child's toes should not be swollen.

## Keep the cast clean and dry

- To keep the cast padding dry, line the edges with "petals" of waterproof tape, if the nurse has not already done this. Cut pieces of tape long enough to reach up inside the cast by an inch or two. Overlap the pieces like the petals of a flower.



- Give your child a sponge bath only. The cast must not get wet.
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### **Do not let anything get inside the cast**

- Do not let your child use any object to scratch under the cast. This means no knitting needles, rulers, pens or toys! This can damage the skin. If itching becomes a problem for your child, check with your family doctor.
- Do not let crumbs, food or small toys slip into the cast. These can cause pressure and damage the skin.

### **Eating for good health**

- To promote healing, a variety of healthy foods from all 4 food groups is good for your child. To learn about healthy eating go to Health Canada's website [www.hc-sc.gc.ca](http://www.hc-sc.gc.ca) and search for "Canada's Food Guide – Children".
- Since your child is not moving around as much as before, they may develop constipation.

### **What activities can my child do?**

- It will take some time for your child to get used to the cast because it limits movement. Carefully follow the instructions you are given about your child's physical activity. Do not let your child kneel, stand or walk without the doctor's order.

The physiotherapist, occupational therapist or nurse will talk with you about how to help your child move.

- After the cast is removed, you will be given more instructions about your child's activity. Your child may need a physiotherapist to learn exercises that will help return strength and movement.

## How can my child travel safely in a vehicle?

- Please bring your child's car seat or booster seat with you for the cast appointment. The surgeon will try to have your child casted so that they will fit into their own seat.
- All car seats and booster seats are different. Follow the instructions that come with your seat.



Please  
note!

**If your child is unable to fit safety in their car seat, you may have additional costs related to getting your child home.**

## How is the cast removed?

- Your child's doctor will decide when the cast will be removed. Removing the cast is fast and painless. A special cast saw that does not hurt your child will be used.
- You may need to comfort your child if they are frightened by the large and noisy saw. It may help to distract your child when the cast is being removed with a favourite toy or activity from home.

**If you have any of the following problems call your child's doctor or go to the nearest hospital emergency room immediately.**

- Bluish, cold or very swollen toes.
- Your child cannot move their toes normally.
- Your child's pain is not relieved with medication or gets worse.
- The cast becomes wet, soft, cracked or soiled.
- There is a bad smell from under the cast.
- The cast is tight.
- An object becomes stuck under the cast.

## How do I contact the doctor?

- During regular office hours, call your child's doctor.
- After hours, call 905-521-5030 and ask to speak with the Orthopedic Surgeon on-call or go to the Emergency Department at McMaster Children's Hospital.