

SPICA CAST

- This is a plaster cast that immobilizes both hips and covers the the patient from appoximatley the nipple line and down to the ankles. The perineum (the groin area) left open to access for toileting.
- Spica casts are utilized for fractures of the femur, hip dysplasia management (operative and non-operative management)
- It is important to remember that your child will become accustomed to this quickly and they will express unhappiness and discomfort for the first few days.



When should seek medical attention?

Call the Children's Hospital and ask for the Orthopaedic registrar or see General Practitioner for initial assessment

- Fevers or child is unwell, not feeding or change in behaviour
- Development of sores or blisters
- Structural breakdown of the cast
- Concern about circulation to the lower limbs
- Cast is getting tight and not fitting
- Strange odour from the cast that is not consistent with soiling

Types of Spica cast

The decision for the type of cast will be dependent on the surgery and indications for the Spica. Your doctor will decide and explain why each cast can and cannot be used for your child.

Non-Waterproof

- These utilize plaster and are absorbent
- There is a synthetic overlay for strength
- It is important to keep the child clean and dry as best as you can as faeces and urine can absorb into the cast

Bathing

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PATIENT INFORMATION



- This involves wet towels and wiping your child
- Using a hair dryer on a low setting to assist with drying
- Hair washing is over the basin and washing and avoiding wetting the plaster spica

Toileting

- Older children will need to be lifted to sit on a toilet and younger children in diapers will require regular checks and changes of diapers (check every 2 hours during the day and 3 hours at night).
 - 2 diapers are used in young children, one in the spica and a second overtop the spica (you will be shown how prior to departure from hospital).
 - If the spica does get wet then try to wipe clean as best as possible and use a hairdryer to dry the spica on a cool setting.
 - Unfortunately, it is nearly unavoidable that the spica will smell due to soiling. Sometimes use of essential oil scents can assist in dealing with this but be wary of any skin reactions with your child.
- **Waterproof**
 - Generally, AquaCast© material is used and a synthetic cast material
 - It is encouraged when this material is used that the cast be regularly cleaned with water
 - These are easier managed with toileting as these casts can be immersed in the bath and prior to your departure you will be educated how to bath your child.

Lifting your child with a spica

- Lift your child supporting the spica and do not lift your child by the under their arms
- If your spica has a bar connecting the knees this can also be used in assisting when lifting your child.

Positioning

- Keep changing position for your child to avoid pressure areas. Reposition your child every 2-4 hours (ie: side, back, belly and supported by pillows and towels). Remember to supervise when repositioning your child. Check the edges of the cast and ensure it is not causing pressure in these regions on the skin.

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Diet

- To assist with bowel motions fruits and vegetables are encouraged to have softer bowel motions
- Keep your child hydrated to keep the stools soft
- Smaller meals and sitting your child upright as much as possible to

Car transportation

- It is illegal to travel with an unrestrained child and the car seat will need to be assessed by the by the occupational therapist prior to leaving hospital. Your child will need a seat that can provide a restraint in the car

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