



THE ORTHOPEDIC PARTNERS

AN RCM CLINIC

PARK CITY • HEBER CITY • SALT LAKE CITY

## Post-op Instructions: When your child is in a Spica Cast

### 1. What is a Spica cast?

- a. A hip spica cast keeps your child's hips (pelvis) and one or both legs in the right position to heal. They will not be able to move their thighs or bend at the hips. A child gets a hip cast when they break a bone in the thigh or have hip surgery. It is most commonly applied in an operating room.



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### 2. Why do we use one?

- a. For immobilization and treatment of **Femur Fractures** in patients <4-5 years old
- b. Care/immobilization of patients with DDH (hip dysplasia)

### 3. The spica cast includes one or both legs; it is designed to keep the extremity/hip in the best position for healing. It is very protective. While in the body cast, the child can be moved without concern that the leg will be injured or harmed.

### 4. How is it applied?

- a. <https://hipdysplasia.org/infant-child/child-treatment-methods/hip-spica-cast/>

### 5. Activity in the cast:

- a. The child can be carried and lifted, but they are usually a little heavier in the cast. Use both hands to carry your child. If there is a bar between the legs, you can lift using the bar, but also support your child's torso/back.
- b. Crawling and scooting are acceptable when the child decides to try this.
- c. Please discourage standing or walking on the affected side, unless it is the WEEK BEFORE the cast is to be removed. *Please confirm with your doctor when it is safe for your child to stand or walk on their leg/hip.*

### 6. Diet: It may take your child a few days to return to eating their normal diet.

- a. Increase your child's intake of high fiber foods, fresh fruits, vegetables, and fluids to prevent constipation.
- b. Prop your child up when eating. Smaller, more frequent meals may work better for your child. Try cutting food into bite-size pieces, and use straws for drinks.

### 7. Travel & Mobility in a Spica:

- a. Your child may need a special car seat for travel while in their cast. A loaner car seat is often provided when your child leaves the hospital.
- b. Your child will need to be belted or supported in wheelchairs, highchairs, and some other types of seating.

- c. Prop your child with pillows, folded blankets, or in a bean bag.
  - d. Wagons can be used to help transport your child while in their cast, and they can be fun/decorative!
8. Toileting in a spica: If your child is potty-trained, your child can sit on the toilet with parent/care-giver assistance. This helps keep the cast clean, so try this when possible!
9. Cast care Pearls:
- a. Keep the cast as clean and dry as possible. If it becomes wet, **do not try** to dry the cast with a blow dryer, especially on a heated setting. Sometimes having a fan nearby while your child sleeps can decrease sweating, and helps a wet cast dry out.
  - b. Do not put anything down inside the cast. This can cause a sore, or an infection. Protect the cast with a towel or large bib to prevent things from going into the cast, such as toys, food, etc.
  - c. If your child complains of itching, use a blow dryer on low heat, or tap the cast with a spoon. The vibration decreases itchy sensations.
  - d. Check the skin daily for sores or irritability.
  - e. The cast will likely get urine or poop on or inside the cast at some point. **Do not fear!** Try to clean it out if possible, using baby wipes or a washcloth. **DO NOT** put baby powder in the cast.
    - a. It helps to turn the child onto their sides, back, and stomach to clean the skin as much as possible.
  - f. Line the cast around the groin with maxi pads (or small diapers); stick them to the cast with duct tape. The sticky part of the maxi pad faces the cast; the absorbent part faces out to capture urine/poop. When the maxi pad/diaper is dirty, switch it out for a new one!
    - a. Do not use maxi pads with wings, or panty-liners. Use a regular size maxi pad or Poise pad.



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- g. You can also line the cast with moleskin, but sometimes it doesn't absorb as much fluid, and may not decrease the smell from urine, etc. This is called "Petaling" the cast.



- a.
- h. Place either a maxi pad or small diaper directly in front the groin, to capture urine and poop. If possible, tuck it inside the cast in front and back. Use a larger diaper around the cast to keep your child warm, keep the interior diaper in place, cover the cast. You can also use snap shorts, boxer shorts, or a longer t-shirt or dress to go over the cast.
- i. You can put Febreeze on the cast, but do not spray this on your child's skin.

10. Online Resources:

- a. <https://spicalife.com/>
- b. <https://hipdysplasia.org/spica-cast-diapering/>
- c. <https://intermountainhealthcare.org/ckr-ext/Dcmnt?ncid=520408223>
- d. <https://hipdysplasia.org/infant-child/child-treatment-methods/hip-spica-cast/>
- e. **Cast coolers:** [https://www.amazon.com/Castcooler-Immediate-Relief-Breathable-Orthopedic/dp/B003XNNCV0/ref=sr\\_1\\_2?crid=3M5R1MJLF3FIY&keywords=cast+cooler+spica+cast&qid=1689467803&srefix=cast+cooler+spica+cast%2Caps%2C140&sr=8-2&ufe=app\\_do%3Aamzn1.fos.006c50ae-5d4c-4777-9bc0-4513d670b6bc](https://www.amazon.com/Castcooler-Immediate-Relief-Breathable-Orthopedic/dp/B003XNNCV0/ref=sr_1_2?crid=3M5R1MJLF3FIY&keywords=cast+cooler+spica+cast&qid=1689467803&srefix=cast+cooler+spica+cast%2Caps%2C140&sr=8-2&ufe=app_do%3Aamzn1.fos.006c50ae-5d4c-4777-9bc0-4513d670b6bc)
- f. <http://viguehouseofhappiness.blogspot.com/2011/11/spica-cast-diaper-tutorial.html>

11. When to call your doctor!!

- a. Your child has severe pain and the pain medication isn't helping.
- b. You see a change in the cast – cracking, softening, drainage from the inside of the cast.
- c. You smell a bad odor coming from the cast.
- d. Your child's toes are cold, blue/gray or swollen.
- e. Your child is not moving their foot/ankle/toes.
- f. The position of the leg or foot in the cast has moved, i.e. the cast has slipped.
- g. Fever with no other signs of illness.

12. Pain Control:

- a. Ibuprofen is recommended to be taken every 6 hrs, and Tylenol every 4 hours, unless there is a specific reason not to use these medications.
- b. Narcotics, including oxycodone, are only taken *if needed*. Please schedule the Ibuprofen and Tylenol for the first few days following surgery, as this will lessen any narcotic medicine that is needed.

- c. Valium (Diazepam) may also be prescribed for muscle spasms. Please use this if you see jerking or spasms, which most often occur in the first 2-3 days after the cast is applied. The medicine can be taken every 6 hrs. It will cause drowsiness. It should not be required after 7 days.