

# Care of your child in a broomstick cast

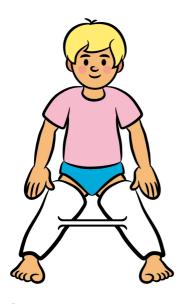
Information for parents



This leaflet aims to give you some information on the care of your child during their hospital stay and tips on how to manage your child at home.

It would be helpful if you could inform us if your child already has a therapist and let them know that your child is having surgery. This will facilitate a quicker and smoother discharge.

A Broomstick cast will be applied after surgery to ensure your child's hips remain in the correct position and to allow healing. It involves a cast on both legs, from the top of the legs, down to the ankles. It will also have a bar in-between the thighs. Although this sounds very restrictive, children generally adapt very quickly to being in plaster and find ways of managing to do things. The cast will impact the care your child will need at home.





# After the operation

Your child will need to be positioned very carefully to ensure that they are comfortable. Various pieces of equipment may be utilised to assist you in positioning your child. Pillows can be used to support your child's broomstick cast to ensure they are comfortable. They can be used under their legs, whilst lying on their backs under their tummy, whilst lying on their front or under the bar, whilst sitting. This will be shown to you by the Occupational Therapist and Physiotherapist before your child goes home.

# **Getting around after your operation**

Your child will require a wheelchair for mobility, whilst in the broomstick cast. This will, either be your child's current wheelchair or one loaned to you. If your child has their own wheelchair, please bring this into hospital so that the Occupational Therapists can check whether it will be suitable for your child. The broomstick cast needs to be supported to prevent the weight of it from putting extra pressure on your child's joints so a board may be attached to the front of the wheelchair to support your child's cast.

The Occupational Therapists will demonstrate and practice safe ways of moving from a wheelchair, bed and toilet. This may involve the use of equipment e.g. sliding board or hoist. Always wait until you have been shown how to move your child before attempting this on your own. It may be possible for your child to walk with their casts on. The Physiotherapist will teach your child the best way to do this.

# **Playtime**

Your child should be able to continue with some of the leisure activities they enjoy. Some outdoor activities will not be suitable but weather permitting, your child may like to go and watch their team mates. Indoor activities i.e. arts and crafts, TV / DVD, computer games or reading are suitable and should be encouraged to prevent boredom and frustration.

# Making changes at home

The Occupational Therapist will discuss the home environment with you and suggest ways in which you can make caring for your child at home safe. This is likely to involve moving a bed downstairs and considering downstairs washing and toileting facilities. This often means using a commode for toileting and having a strip wash. Even if you have a downstairs toilet, it is unlikely that your child will be able to access it due to the size of the cast. The Occupational Therapist will discuss these options with you.

You will be shown before discharge how best to position your child for toileting. Some children are able to sit on a toilet or commode to go to the toilet. For those that cannot, urine bottles and bedpans can be provided for use at home, and this will be explained to you by either the nursing staff or Occupational Therapist before you go home. You need to keep the skin clean and dry to ensure it is not getting reddened or sore. Wet wipes are useful as they clean the area without getting the plaster too wet.

#### **School**

Some schools are able to accommodate children in broomstick casts but you will need to speak to your child's school, prior to surgery. If your child is unable to attend school, it is advised that you arrange home tuition before coming into hospital.

### How long will my child have to wear the cast?

4 - 6 weeks.

Please be aware that sores over the knees, heels and at the edges of the cast can sometimes occur. If this happens, please contact the nurse specialists.

# **Discharge from hospital**

Please be aware that the length of stay in hospital varies from child to child. Our main aim is to make sure you and your child will be safe at home. Your child will need hospital transport to get home as they are unlikely to be able to get in a car. This may take time to book and is not always available on the same day. We also need to ensure that you have the correct equipment for going home.

#### **Car seats**

It is unlikely your child will fit in their current car seat as the seat won't be wide enough or deep enough to safely support your child.

If your child is over 9 kg in plaster and is under 4 years of age, they may be able to use a specially modified car seat. The car seat can then be used as a standard car seat, once the plaster has been removed for children up to 25 kg.

Specially modified car seats can either be bought or loaned from incarsafetycentre.co.uk.

Steps may be able to offer a grant to help with the purchase / hire of car seats. Please contact: www.steps-charity.org.uk for further details.

We hope you have found this information helpful. If you have any questions or concerns, please speak to your Occupational Therapist or Physiotherapist, either at your pre-assessment appointment, or on the ward when your child is admitted.

# **Contact details**

Children's Orthopaedic Team: (Monday - Friday, 8.00 am - 5.00 pm)	0113 3928570
Child Therapy department:	0113 3626610
Plaster room:	0113 3925717
Pre-assessment:	0113 3923167
Children's Surgical Assessment Lounge	
(CSAL):	0113 3926502
Ward L41:	0113 3927441
Occupational Therapy:	0113 3923612





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