INSTRUCTIONS FOR USE



THE WaterProof Cast Liner on the Market

AquaCastTM Waterproof Cast Liner

Description:

AquaCast Liner is a waterproof, breathable cast liner which contains billions of tiny pores that are much larger than moisture vapor molecules but much smaller than liquid water droplets. When used underneath a fiberglass cast tape, the patient is able to immerse the cast in water. When exposed to liquids, the liner remains dry and the patients' skin gets wet. Most of the water will drain quickly out of the cast openings. The patients' body heat will warm the remaining water causing it to pass through the liner and the casting tape.

Indications:

AquaCast Liners are designed for orthopaedic use where cast padding is required for use with rigid external immobilization, including fractures, sprains, strains, splinting or bracing, orthotic/prosthetic and serial casting.

Notice:

After application, the patients' toes or fingers may temporarily appear blue or discolored. This is normal as the patients adjust to the casting tape and the cast. Once the extremity adjusts to the temperatures of the tape and to the cast, within 10-15 minutes, the toes and fingers should return to their normal color.

Precautions:

- If the patient is expected to wet the AquaCast Liner, use a rigid immobilizing material that does not break down in water such as fiberglass casting tapes and nonabsorbent splints
- Do not use standard padding, stockinettes, or other cotton materials with AquaCast
- AquaCast is not to be used on open wounds or sores. These conditions require increased caution on the part of the physician, cast technician and patient.
- Please do not put oils, lotions, powders, sand, dirt, grease, non-prescribed soaps or solvents into the cast. These contaminants need to be washed out immediately and as thoroughly as possible.
- Patients will experience normal itching and discomfort in any cast. They should not insert foreign objects into the cast this can lead to skin problems. Some patients may experience skin irritation, rashes, maceration, odor, blister and general discomfort.
- Patients should not engage in activities which could lead to damage of the cast area or reinjure themselves.
- AquaCast Liners are not made of cotton and care needs to be taken when removing the cast. SawStopTM material or a Zip Stick should be used when removing a cast to prevent injuries.
- AquaCast Liners are not sterile and should not be sterilized.

Application of AquaCast Liners

- 1. Wrap the AquaCastTM Liner around the extremity using a spiral motion. Start at the small end of the extremity. Overlap by at least 50%. The adhesive is away from the patient's skin. Do not wrap the liner too tight.
- 2. Additional wrap layers are acceptable but will increase drying time. Wrinkles are expected, do not attempt to remove them unless it will create an abrasion issue with the skin. Extend the liner ½" beyond the expected edge of the casting tape if no cuff is desired. Extend it 1" for a cuff.
- 3. Strips of folded AquaCast liner can be used around the thumb and hand webbing. Additional cast liner can be placed over bony prominences. If additional layers are used, the adhesive side should be matched to adhesive side.
- 4. Cuffing: After leaving 1" of extra cast liner for a cuff, make two cuts each 1" long on opposite sides of the extremity and fold these over. Secure with casting tape, leaving ½" of cast liner exposed. If cuffing is not desired, place a folded over piece of liner at each end of the cast to serve in place of the cuff. The fold should be ¾".

Patient Instructions: Please provide patient with the AquaCast Liner Cast Care brochure.

- If their doctor allows, the patients can bathe, exercise, and swim. Patients should use a mild soap followed by a thorough rinsing of the cast with clean water.
- Patients should not insert foreign objects into their casts or allow contaminants such as oils, lotions, powders, sand, dirt, grease, soaps or solvents to enter the cast. If these contaminants do enter the cast, they need to be washed out immediately and thoroughly. The patient should consult their doctor if irritation occurs.
- Drying times will vary based on the cast type and other climactic conditions but the cast should be sufficiently dry in about an hour. No special drying procedures are necessary after wetting the cast. Factors that affect drying time include air temperature, humidity levels, as well as body temperature and activity level. Patients can reduce the drying time by draining the liquid water from their cast after they are out of the water.
- Patients should be given basic cast care instructions from either/both their physician and/or cast technician. The patients should contact the physician is they are experiencing pain, swelling, an unusual odor coming from the cast, numbness or tingling, developing a blister or if the cast develops a soft spot or cracks. Also, consult a physician if you have a fever, skin irritation or if you have any questions or concerns.

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To order:

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