The skin
After the cast is removed, the skin may be dry, flaky or even smelly. Sometimes the skin appears red with small raised bumps. The hair on the skin may appear darker and thicker than normal. Over time the appearance of the leg will return to normal.
Wash the leg in warm soapy water. A soft flannel may be used but avoid scrubbing the skin as this may cause the skin to bleed. Apply a gentle moisturising lotion after bathing. It may take several days of gentle washing to remove all the dead skin.

Swelling
Sometimes there is swelling once the cast is removed. Elevate the leg when resting (Figure 1). Gentle foot exercises (moving the foot up, down and in circles) will be helpful. If swelling is excessive limit physical activity, and rest and elevate the leg.

The muscles and joints
The muscles have not been used whilst the leg has been in the cast and will be weak initially. The leg will appear thinner, and the ankle or knee may be stiff. The leg will gradually return to the normal size and strength with regular use.

Mobility (walking)
Your doctor will advise whether there are restrictions on walking such as using crutches, walking frame or wheelchair. Your child may be anxious about putting weight through the leg. It is normal to limp at first, or walk with the leg held stiff or out-turned.

Physiotherapy
Most children regain full use of their leg without the need for physiotherapy. Routine activities and play is usually enough for children to return to normal within a few months. However your child’s doctor will advise if physiotherapy is required.

Returning to sports
High-impact, contact sports should be avoided for a minimum of 4 to 6 weeks after removal of the cast.

Your child’s cast was removed on ____ / ____ / ____

Special instructions
- No restrictions
- No physical education/sports for _________ weeks
- Wheelchair for _________ weeks
- Walking frame for _________ weeks
- Crutches for _________ weeks
- Other

Figure 1. When resting, raise the leg on pillows when sitting or lying down