Description

3M™ Scotchcast™ Wet or Dry Cast Padding is a hypoallergenic, synthetic cast padding that allows a patient the ability to expose the cast to wet conditions. Scotchcast Wet or Dry Cast Padding contains a water repellent fiber resulting in less retention of water than traditional padding.

The combination of Wet or Dry Cast Padding and 3M™ Scotchcast™ Plus Casting Tape provide a patient the flexibility to allow the cast to get wet while showering, bathing or participating in water related activities without first covering the cast. After wetting, most casts feel dry within one to three hours.

NOTE: This product is similar in appearance to traditional, synthetic padding. The blue yarn in the core of the product indicates Scotchcast Wet or Dry Cast Padding.

If you have any questions, comments or need more Wet or Dry Patient Information Sheets, in the U.S. contact our 3M Health Care Customer Helpline at 1-800-228-3957.
Indications
Scotchcast Wet or Dry Cast Padding is intended for use in constructing casts for either wet or dry immobilization. This product is clinically tested and recommended for use with Scotchcast Plus Casting Tape and 3M™ Synthetic Cast Stockinet only. Performance with other casting tapes has not been tested.

Precautions
• Do not use Wet or Dry casting accessories in combination with other padding or stockinet products.
• Exercise caution when allowing a patient to get a cast wet. Patients should be instructed to keep casts dry if they:
  – have broken or compromised skin conditions.
  – are diabetic or lack sensation in extremities.
  – have fungal infection, such as athlete’s foot (tinea pedis).
  – lack the ability to follow instructions.
• It is not recommended that an infant get a cast wet since it is difficult to drain water from an infant’s cast.
• Exercise caution in assessing whether young children should get a cast wet. If the cast is wet, the parents or guardians should be instructed to check the condition of the cast and skin under the cast hourly after the child has gotten the cast wet. If the cast is not drying, or white macerated skin persists, the parents or guardians should not allow the child to get the cast wet.
• If the cast is wet, a patient MUST ALLOW the cast and the skin to dry thoroughly before getting the cast wet again to prevent maceration, skin irritation, heat rash (miliaria) and possible infection. A patient should be carefully instructed in the necessity of thoroughly drying the cast.
• Drying time for casts will vary. In some cases, weather conditions, perspiration or cast construction will prevent the cast from drying completely. Leg casts take longer to dry than arm casts. Also, cast thickness will affect drying time. Most casts will feel dry in one to three hours. If a cast feels wet longer, the patient should stop getting the cast wet and contact a physician.
• A patient must maintain the cast in a suitable position for drying. A patient who cannot maintain the cast in a suitable position for draining water (see Instructions for Use) should be instructed to keep the cast dry.

Instructions for Use
• Preparation of the site, wound management, fracture reduction, post-surgical care and general patient supervision should follow established practices.
• Slip one layer of 3M Synthetic Cast Stockinet over the affected part, and/or wrap with Wet or Dry Cast Padding. If desired, additional cast padding may be used for greater protection of pressure points and bony prominences. For additional information on cast construction, follow instructions for use found in the 3M™ Scotchcast™ Casting Products insert.
• Patients should be directed to follow the enclosed instructions outlined in the Patient Information Sheet for patients wearing casts with Wet or Dry Cast Padding.
• A cast constructed with Wet or Dry Cast Padding will dry as water drains from the cast. Gravity causes the water to drain. To help prevent water from accumulating in the cast, instruct the patient to drain their casts as follows:
  – short leg cast: Bend leg to tilt toes downward to allow cast to drain from distal end or elevate leg and let drain from proximal end of cast.
  – short arm cast: Hang arm downward and drain from distal end of cast or prop arm up on elbow and drain from proximal end of cast.
  – long arm cast: Hang arm downward and drain from distal end of cast.
  – long leg cast: Elevate leg and allow to drain from proximal end of cast.

If cast construction will not allow the cast to properly drain, the patient should be instructed to keep the cast dry.

For best results, store product between 59–86°F (15–30°C). For shelf life, refer to the expiration date which appears on each package.
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• Preparation of the site, wound management, fracture reduction, post-surgical care and general patient supervision should follow established practices.
• Slip one layer of 3M Synthetic Cast Stockinet over the affected part, and/or wrap with Wet or Dry Cast Padding. If desired, additional cast padding may be used for greater protection of pressure points and bony prominences. For additional information on cast construction, follow instructions for use found in the 3M™ Scotchcast™ Casting Products insert.
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