**POSITION**

- patient is supine
- 3 layers of padding, extend from MT heads to half way up thigh
- ankle should be at 90°
- knee should be at 30°

**PLASTER**

- pre-measure all slabs on uninjured leg and trim all corners so that they are rounded
- **BK BACK-SLAB**: 8 layers of 15cm plaster from MT head to just below knee. wrap in 1 layer HAFTAN, mould and allow to dry
- **U-SLAB**: 8 layers of 10cm plaster best done in 2 pieces (medial & lateral) extending from heel to mid-thigh. folds at knee cut out and smoothed over. wrap in 1 layer HAFTAN and mould
- **AK BACK-SLAB**: 6 layers of 15cm plaster from heel to level of mid-thigh. wrap in 1 layer HAFTAN
- wrap in crepe when dry

**POSITION**

- elevate calf on pillow

**DISPOSITION**

- ADMIT
- neurovascular obs for tibial #s as risk of compartment syndrome

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ALL POTENTIALLY UNSTABLE FRACTURES REQUIRE X-RAYS AFTER PLASTERING EVEN IF NO ATTEMPT AT MANIPULATION WAS MADE. THIS X-RAY MUST BE REVIEWED BY AN ED CONSULTANT OR ORTHO REG BEFORE THE PATIENT LEAVES THE DEPARTMENT.