

**“SHORT LEG WEIGHT-BEARING CAST” PRACTICAL EXAMINATION
COMPETENCY ASSESSMENT SHEET (Form 1B)**

NAME: _____

EVALUATOR: _____

Date: _____

Lower Extremity Casting Technique – Short Leg WB Cast

Time allotted = 15 minutes

Patient Position and Preparation	Exceeds Standards	Meets Standard	Approaching Standard	Does Not Meet Standard
Selects cast stand for technique (90-90 foot/ankle position)	3	2	1	0
Extremity is clean and free from dirt/debris – rings, bracelets removed when necessary	3	2	1	0
Pre-application check – neurovascular status	3	2	1	0
Padding / Stockinet Technique				
Selects appropriate stockinet for patient leg size	3	2	1	0
Stockinet should extend a few inches past toes and above knee for proper fold back	3	2	1	0
Starts 3” or 4” padding distal to the 1 st MTP joint	3	2	1	0
Applies three (3) circular turns around MTP joint area before going up the foot	3	2	1	0
Continues to wrap the foot and ankle complex overlapping ½ previous layer	3	2	1	0
Ensures the calcaneal area is appropriately covered	3	2	1	0
Starts new roll of padding at ankle and continues up lower leg (½ overlapping turns)	3	2	1	0
Uses “compression technique” on downward approach to distal tibia (½ overlap)	3	2	1	0
Continues beyond foot/ankle complex towards toes (½ overlap)	3	2	1	0
Applies “bumper” to proximal tibia for patient comfort	3	2	1	0
Palpates proximal to 1 st / 5 th metatarsal head and marks area with felt tip pen	3	2	1	0
Cuts and folds padding both lateral and medial sides to ½ inch of the indicator marks	3	2	1	0
Pulls stockinet over padding and leaves longer on plantar aspect to cover MT heads	3	2	1	0
Pulls stockinet down over padding at proximal end of cast (may include finger technique)	3	2	1	0
Fiberglass Application				
Selects 3” or 4” fiberglass appropriate for patient	3	2	1	0
Starts application at distal end leaving ½ inch of padded area showing at distal end	3	2	1	0
Rolls tape around foot bringing tape forward, past the foot to accommodate rounded MTs	3	2	1	0
Places finger on tape near 2 nd toe on bottom and hold in place as you approach foot	3	2	1	0
Repeats above step three (3) times	3	2	1	0
Wraps fiberglass around ankle/foot complex only	3	2	1	0
“Coves” fiberglass application at foot/ankle crease to eliminate ridges	3	2	1	0
Starts new roll and initiates connection on ankle/foot complex to lower leg application	3	2	1	0
Continues fiberglass up the lower leg to proximal tibial while overlapping ½ previous layer	3	2	1	0
Continues back down lower leg overlapping ½ towards ankle/foot	3	2	1	0
Finishes fiberglass roll around foot and ends on dorsal aspect	3	2	1	0
Lamination and Molding Techniques				
Swings cast stand and places foot on molded arch support	3	2	1	0
Adequately sprays cast with water and properly laminated fiberglass	3	2	1	0
Performs “Achilles” mold technique	3	2	1	0
Performs “proximal anterior tibial” mold technique	3	2	1	0
Performs “popliteal” area mold technique	3	2	1	0
Support and Neatness				
Application controls/limits plantarflexion/dorsiflexion and eversion/inversion	3	2	1	0
Allows for full phalangeal ROM	3	2	1	0
Minimizes extremity “pistoning”, rotation/rocking within cast	3	2	1	0
Maintains good circulation of lower leg/foot/ankle/toes – post-check neurovascular check	3	2	1	0
Removal / Extrication Principles				
Maintains control of cast saw with one finger on cast at all times	3	2	1	0
Uses up/down motion straight into cast (no blade dragging)	3	2	1	0
Cuts through medial and lateral aspect	3	2	1	0
Utilizes cast spreader as necessary	3	2	1	0
Opens cast and slides fiberglass application away from patient	3	2	1	0
Checks for skin damage and cleans extremity	3	2	1	0

Comments: