

Australian Institute of Orthopaedic Technologists Inc.

AIOT newsletter

**September
Newsletter
2022**

- **Letter from the President**
- **Student nurses time in fracture clinic**
- **Lisfranc joint line, ligament & mechanism**
- **Ollie B. Slotheran**
- **X-ray corner**
- **Who am I?**
- **A week in the life of an orthopaedic registrar**
- **Orthopaedic nurse liaison**
- **Objects found in casts**



OrthoHumerus

Product Highlights

- Pre shaped thermoplastic bi-valved shells
- Optional sling attachment
- Comfort plush material
- Ezy velcro closure



OrthoHumerus

Indications

- ③ Humeral fractures
- ③ Humeral fracture non-union
- ③ Post-surgical humeral stabilisation



Measuring Guide

Measure the circumference of mid bicep.

Size	Bicep (cm)	Bicep (in)	Product code (regular length)	Regular size length of brace
XS	22.5-26cm	9-10 ^{1/4} "	OBHUM1-1	27.5cm
S	26-29.5cm	10 ^{1/4} -11 ^{1/2} "	OBHUM1-2	29.5cm
M	29.5-33cm	11 ^{1/2} -13"	OBHUM1-3	32cm
L	33-36.5cm	13-14 ^{1/2} "	OBHUM1-4	33cm
XL	36.5-40cm	14 ^{1/2} -15 ^{3/4} "	OBHUM1-5	35cm

For further information contact: Bryan Francis - bryan@medicalaccessories.com.au

Letter *from the President.*

Hello to all Orthopaedic cast room staff,

I trust that you are all experiencing a return to some normality following the covid events of the past couple of years, and you and your families are in good health.

Unfortunately this year due to the uncertainty of covid it was decided to cancel the 2022 National conference in Cairns. The AIOT are extremely confident that we are able to present the conference in Cairns in 2023 with a definite date being available in the near future. I hope that we will have plenty of interest from staff all over Australia wanting to attend. The conference will also host the Annual General Meeting, it is time to elect a new executive committee and it is hopeful that we will have new members willing to take on committee positions. The AIOT needs new enthusiastic members to drive this association forward and without them there are no conferences, newsletters and a voice for our profession in the training forum.

On the subject of training and education the new Diploma course has been signed off by the National Training Body the Australian Skills Quality Authority (ASQA). However the course still requires a Training Institution such as a TAFE College or (RTO) Registered Training Organisation to deliver the course and at this point in time we are unsure when and if, this will occur.

In Queensland the AIOT currently has an agreement with Queensland Health and the Union to continue to offer new trainee cast room staff a similar program to the discontinued Certificate IV In Cast Technology Modules. This has been put in place to alleviate the void of experienced Orthopaedic and cast Technicians due to retirement etc and will offer staff a qualification similar to the Certificate IV along with remuneration incentives.

Information is available on the (QHEPS) Queensland Health Website, please be mindful that to be eligible you would need to be employed in a position working for Queensland Health, and a Training position has been advertised.

Regards
Terry James
AIOT President

How to contact us...

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John Kinealy*

AIOT Website

www.aiot.com.au

Fracture clinic placement at the Austin hospital Melbourne

Alyce Keane
3rd Year Nursing Student
La Trobe University

"3rd year student nurse Alyce's time in fracture clinic"

As part of my nursing community clinical placement through La Trobe University, I have been fortunate enough to spend a morning at the Austin Health outpatient fracture clinic, at the Heidelberg Repatriation Hospital.

I was unaware of the important role that nurses play in fracture clinics and was surprised to see how involved and wide a trained nurse's scope can be within these clinics.

I was able to assist the team in conducting cast removals as they used the cast saw and the various application processes and means, such as a plaster back slabs and fibreglass casting.



Additionally, I was able to assist in comforting patients whilst ensuring that the correct application and positioning of the fractured limb was maintained in the process. I thoroughly enjoyed the hands-on experience offered at this clinic which has definitely been a major highlight of this placement!

Lisfranc joint line, ligament and mechanism

Keng Lin Wong https://www.researchgate.net/figure/Diagram-demonstrating-the-Lisfrancs-and-Choparts-joints_fig1_250920924 17/09/2022

<https://upswinghealth.com/conditions/lisfranc-injury/17/09/2022>



DONJOY UltraSling PRO

UltraSling PRO takes the next step in providing comfort, compliance and convenience to help improve the post-operative experience for your patients.

Universally designed to fit the right or left arm, the UltraSling PRO features an envelope that can be adjusted and sized to accommodate a wide range of patients. Plus, the revolutionary shoulder strap system allows for fast, easy application.

Uniquely Universal

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SUPPORTING YOU FROM TOP TO TOE



PROCARE XcelTrax 2.0 Walkers

Designed for support and comfort following trauma or post-operative procedures. A lightweight, sturdy design with anatomically shaped uprights help to facilitate a better fit. Integrated strapping aids in full circumferential support and compression. Cushioned inner/outer soles help to absorb shock upon heel strikes.

DONJOY X-ROM Post-Op Knee Brace

Fast, simple application and adjustment through innovative strap, tab and buckle designs. The X-ROM™ helps control and protect ROM with a quick-lock design and hinge pull-out stops.

Four independent telescoping sliders and the ability to contour to the patient's leg to add varus and valgus support, the X-ROM comfortably accommodates a wide range of patient shapes and sizes.

Come Back Strong

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Meet Ollie B. Slotheran

Ollie is our fracture clinic mascot and takes pride and place at the Joan Kirner Women's and Children's hospital in Melbourne. Ollie belongs to our clinic nurse Sophie, and he brings a great deal of joy to the children who attend our clinic and they are fascinated with his cast, sling and orthoses.

Ollie has an above elbow cast with a collar & cuff, he has a right leg post op knee immobiliser, and on his left leg a cam boot.

The main picture is Ollie celebrating Christmas with his reindeer antlers.





PrimeNet Dry™

Undercast stockinette



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Hypoallergenic



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Easy application

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X-Ray Corner

For your viewing pleasure!

John Kinealy



Is the radius dislocated in the above films?
What is my name?



Bennett's, Rolando or neither!
Describe me.



Which way is the apex pointing,
Radially or Ulnarly?

Who Am I?

- I am a considered a trans-syndesomotic fracture. I am a _____
- I am the broad triangular ligament on the medial side of the ankle _____
- I am a fracture found in the diaphyseal or metadiaphyseal region in children, one side of the cortex is still intact _____
- I am the joint between the Trapezium and the 1st metacarpal _____
- I am the ring shaped ligament around the neck of the radius _____
- I am the space between the medial side of the Talus and the medial malleolus _____
- I am the tendon that extends the thumb and may be ruptured following a Colles' fracture _____

Actimove® Shoulder Abduction Sling

Actimove® Shoulder Abduction Sling is designed to aid pain relief by immobilizing the shoulder joint. It limits the range of motion, providing rest for the shoulder in a flexed elbow position and upper-arm abduction at around 15°. Patients will appreciate the easy one-handed application and the comfort of the soft, breathable and washable material.

- Easy to apply and to remove, even with one hand, thanks to the stable snap-lock buckle connecting the strap with the pocket, and the quick release buckle attached to the waist strap.
- Designed to aid pain relief through shoulder immobilization at the upper-arm abduction at around 15°.
- Secures and tailored fit for most patients through the extra-long waist strap of which can be adjusted in length.
- Increased comfort through the adjustable padded neck strap reducing the pressure on the neck.

- For increased patient comfort during prolonged wear as the perforated material allows for breathability.
- Brings comfort during wear due to the soft outer and inner materials, edges and seams.
- Helps to maintain muscle strength through hand and arm muscle training exercises using the attached squeeze ball.
- Clothes are protected through the soft, supple and colour fast material.
- Dirt and signs of wear are less visible due to the black inner lining of the arm pocket.



- Universal, right or left fit, eliminates the need for excess stock.
- For easy care and a hygienic wearing experience, can be machine washed at 40°C.
- Convenient during medical check-ups through radiolucency.
- Suitable for those sensitive to latex as it's free from natural-rubber-latex.

Fields of application include:

- Minor instability of the shoulder (e.g., dorsal instability)
- Postoperative use (e.g., after rotator cuff rupture)
- Joint dislocations (e.g., shoulder luxation)



Ref.- No.	Size	Measurements	Unit
73446-04	S	< 37 cm	1 Immobilizer
73446-05	M	37 - 40 cm	1 Immobilizer
73446-06	L	40 - 43 cm	1 Immobilizer
73446-07	XL	> 43 cm	1 Immobilizer



Easy one-handed application thanks to the stable snap-lock buckle.

A week in the life of an orthopaedic registrar

Dr Paul Johnson

Unaccredited orthopaedic registrar

Orthopaedic surgery is a rewarding and very demanding career. We treat every patient demographic and have such a varied breadth of presentations that every day is interesting and every day I see something new. The technical aspect really appeals to me. From a young age I always loved taking things apart and putting them back together - lego, fixing up cars and then working at Bunnings as a student. When I discovered that a medical specialty such as orthopaedics could provide me this technical challenge and satisfaction I was instantly attracted to it - and have never looked back. At a core level I enjoy the fact that the majority of orthopaedic patients - both elective and emergency - come in with a problem and, relatively quickly we can 'fix it' and see a result.

I am now five years into my career as a doctor, and third year working full time as an orthopaedic registrar. I still have at least 6 years until I become a RACS qualified orthopaedic surgeon. A standard working week for me involves a mixture of theatre, ward round, clinic and on-call, in addition to unit meetings and training time. There is a rotating roster to share duties and roles between all of the registrars, and we are generally on-call once a week.

You do not become an orthopaedic surgeon overnight. There is a huge amount of theoretical and technical knowledge and skill that is required. I am now five years into my career as a doctor, and third year working full time as an orthopaedic registrar.

I still have at least 6 years until I become a RACS qualified orthopaedic surgeon. A standard working week for me involves a mixture of theatre, ward round, clinic and on-call, in addition to unit meetings and training time. There is a rotating roster to share duties and roles between all of the registrars, and we are generally on-call once a week.

Monday morning I arrive at 0630, to prepare for a 0645 registrar handover. This handover is crucial to ensure all inpatients and any outpatients awaiting operations are handed over to the rest of the team, to make sure all plans are in place and nothing is missed.



At 0730 begins our consultant ward round. It is a truly multidisciplinary affair with our head of unit, registrars, residents, interns, ward ANUM, physiotherapists and orthotists. It is a big team, and truly means our patients get the best possible care with such an experienced team from diverse backgrounds. Once the ward round is finished, we get started at fracture clinic, which runs for the rest of the morning. We see a diverse mix of patients of all ages, with acute injuries which are managed either operatively or non-operatively. Patients are seen at every stage of their journey: newly referred after a recent injury, pre- or post-operatively, and weeks down the track following an intervention. Fracture clinic is another multi-disciplinary setting. We work closely with the nursing staff and plaster technicians who help in managing patients requiring plastering and wound reviews, and also the physiotherapists and orthotists to aid in patients' rehabilitation and recovery.

Monday afternoon involves either a half day (of which we get two a week) or into the operating theatre. As a registrar, our involvement in the operating theatre varies from assisting a consultant surgeon, to performing part or all of an operation independently. How much we do depends on our level of experience, the relationship we have with the specific consultant, and how complex the operation is.

“You do not become an orthopaedic surgeon overnight. There is a huge amount of theoretical and technical knowledge and skill that is required!”

Tuesday starts with a handover at 0700 and then a registrar ward round to follow. Depending on the specific week, I will either head to theatre or off for half a day.

Wednesday starts with a handover at 0700, and then into our weekly unit meeting. This is another multidisciplinary setting, with consultants, registrars and junior medical staff, nursing and allied health all in attendance. The meeting involves presenting all pre- and post-operative patients for the week and discussing patients with complex issues.

Wednesday afternoon will then - depending on the week - involve either theatre or a half day.

Thursday starts in a similar fashion to Tuesday, with a handover at 0700 and then a registrar ward round to follow. Thursday afternoon is busy, where we have our second and busiest fracture clinic for the week. Where Mondays' clinic will have 60-70 patients, Thursday will have 100-120 patients. Clinic will generally finish at 6pm, to then go straight into our second unit meeting for the week (run in a similar fashion to the Wednesday morning meeting).

Friday will start with a handover at 0700 and then a registrar ward round to follow. Again depending on the week, the rest of the day will either involve a theatre list, or being on-call.

As the on-call registrar, it is my job to take all referrals from the emergency department, other medical units, general practitioners and other hospitals. Aside from taking referrals, my time will be spent in the operating theatre assisting or operating on patients with injuries requiring emergency surgery.



**BREATHABLE
WRIST SPLINT**



DESCRIPTION: Breathable, lightweight, and comfortable, this splint is designed to provide support and stability to the wrist and hand. It is ideal for individuals with carpal tunnel syndrome, arthritis, or other conditions that affect the wrist.

FEATURES:

- Breathable mesh fabric
- Adjustable straps for a secure fit
- Lightweight and comfortable
- Provides support and stability to the wrist and hand

INDICATIONS:

- Carpal tunnel syndrome
- Arthritis
- Other conditions that affect the wrist

**RODAN
SHOULDER
IMMOBILIZER**



DESCRIPTION: The Rodan Shoulder Immobilizer is a professional-grade device designed to immobilize the shoulder joint. It is used to provide support and stability to the shoulder, allowing for healing and recovery after surgery or injury.

FEATURES:

- Professional-grade construction
- Provides immobilization and support to the shoulder joint
- Adjustable straps for a secure fit
- Comfortable and easy to use

INDICATIONS:

- Shoulder surgery
- Shoulder injury
- Post-operative care

**VULKAN
MID-ARM
SLING**



DESCRIPTION: The Vulkan Mid-Arm Sling is a professional-grade device designed to immobilize the arm and shoulder. It is used to provide support and stability to the arm and shoulder, allowing for healing and recovery after surgery or injury.

FEATURES:

- Professional-grade construction
- Provides immobilization and support to the arm and shoulder
- Adjustable straps for a secure fit
- Comfortable and easy to use

INDICATIONS:

- Arm and shoulder surgery
- Arm and shoulder injury
- Post-operative care

**RODAN
AQUAFORM
HUMERUS
FRACTURE BRACE**



DESCRIPTION: The Rodan Aquafর্ম Humerus Fracture Brace is a professional-grade device designed to immobilize the humerus. It is used to provide support and stability to the humerus, allowing for healing and recovery after surgery or injury.


FEATURES:

- Professional-grade construction
- Provides immobilization and support to the humerus
- Adjustable straps for a secure fit
- Comfortable and easy to use

INDICATIONS:

- Humerus surgery
- Humerus injury
- Post-operative care

**WHITCHAM
PINKIE
HARNESS**



DESCRIPTION: The Whitcham Pinkie Harness is a professional-grade device designed to immobilize the pinkie finger. It is used to provide support and stability to the pinkie finger, allowing for healing and recovery after surgery or injury.

FEATURES:

- Professional-grade construction
- Provides immobilization and support to the pinkie finger
- Adjustable straps for a secure fit
- Comfortable and easy to use

INDICATIONS:

- Pinkie finger surgery
- Pinkie finger injury
- Post-operative care

**TRI-PANEL
KNEE
IMMOBILIZER**



DESCRIPTION: The Tri-Panel Knee Immobilizer is a professional-grade device designed to immobilize the knee. It is used to provide support and stability to the knee, allowing for healing and recovery after surgery or injury.

FEATURES:

- Professional-grade construction
- Provides immobilization and support to the knee
- Adjustable straps for a secure fit
- Comfortable and easy to use

INDICATIONS:

- Knee surgery
- Knee injury
- Post-operative care

**BROWN MED
HEELOCK
CRADLE**



DESCRIPTION: The Brown Med Heelock Cradle is a professional-grade device designed to immobilize the heel. It is used to provide support and stability to the heel, allowing for healing and recovery after surgery or injury.

FEATURES:

- Professional-grade construction
- Provides immobilization and support to the heel
- Adjustable straps for a secure fit
- Comfortable and easy to use

INDICATIONS:

- Heel surgery
- Heel injury
- Post-operative care

**VULKAN
STABILITY
ANKLE BRACE**



DESCRIPTION: The Vulkan Stability Ankle Brace is a professional-grade device designed to immobilize the ankle. It is used to provide support and stability to the ankle, allowing for healing and recovery after surgery or injury.

FEATURES:

- Professional-grade construction
- Provides immobilization and support to the ankle
- Adjustable straps for a secure fit
- Comfortable and easy to use

INDICATIONS:

- Ankle surgery
- Ankle injury
- Post-operative care

**VULKAN
FIXED
WALKER**



DESCRIPTION: The Vulkan Fixed Walker is a professional-grade device designed to immobilize the foot and ankle. It is used to provide support and stability to the foot and ankle, allowing for healing and recovery after surgery or injury.

FEATURES:

- Professional-grade construction
- Provides immobilization and support to the foot and ankle
- Adjustable straps for a secure fit
- Comfortable and easy to use

INDICATIONS:

- Foot and ankle surgery
- Foot and ankle injury
- Post-operative care

**PERFORMANCE HEALTH
WOUND CARE**



DESCRIPTION: Performance Health Wound Care is a professional-grade device designed to provide wound care. It is used to provide support and stability to the wound, allowing for healing and recovery after surgery or injury.

FEATURES:

- Professional-grade construction
- Provides support and stability to the wound
- Adjustable straps for a secure fit
- Comfortable and easy to use

INDICATIONS:

- Wound care
- Post-operative care

**PERFORMANCE HEALTH
WOUND CARE**



DESCRIPTION: Performance Health Wound Care is a professional-grade device designed to provide wound care. It is used to provide support and stability to the wound, allowing for healing and recovery after surgery or injury.

FEATURES:

- Professional-grade construction
- Provides support and stability to the wound
- Adjustable straps for a secure fit
- Comfortable and easy to use

INDICATIONS:

- Wound care
- Post-operative care

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DESCRIPTION: Performance Health Wound Care is a professional-grade device designed to provide wound care. It is used to provide support and stability to the wound, allowing for healing and recovery after surgery or injury.


FEATURES:

- Professional-grade construction
- Provides support and stability to the wound
- Adjustable straps for a secure fit
- Comfortable and easy to use

INDICATIONS:

- Wound care
- Post-operative care

**PERFORMANCE HEALTH
WOUND CARE**



DESCRIPTION: Performance Health Wound Care is a professional-grade device designed to provide wound care. It is used to provide support and stability to the wound, allowing for healing and recovery after surgery or injury.

FEATURES:

- Professional-grade construction
- Provides support and stability to the wound
- Adjustable straps for a secure fit
- Comfortable and easy to use

INDICATIONS:

- Wound care
- Post-operative care

CALL 1300 43 422

Orthopaedic liaison nurse Austin hospital

RN Emily Kelso

Orthopaedic liaison nurse Emily speaking, if I had a dollar for every time I use this phrase to answer the phone I'd be rich. I have been one of the two specialist clinics Orthopaedic liaison nurses at the Austin Hospital for about five years, and to say it's a busy role is an understatement. There are thousands of patients under the Orthopaedic outpatient unit with hundreds of patients being seen in the clinics every week, so my job can be a little overwhelming at time and also very rewarding.

I work in this role three day a week, two of which are our main clinic days and things would never run smoothly without the amazing team I'm blessed to work with. In between the countless emails, phone calls, teams chats and meetings I am responsible for overseeing the running of the clinics for all the Orthopaedic

consultants; which is a challenge within its self, managing the two fracture clinics that are run weekly and the triaging of all new orthopaedic referral from both within the hospital and from the community. As my job title suggests I spend a lot of time liaising with the doctors, radiology and allied health departments and clerical staff to make the clinics run as smoothly as possible. This not only benefits the patients but also make its more pleasant for the staff as they know who to turn to with all Orthopaedic outpatients related question. With anywhere up to 120 patients being seen in fracture clinic alone on any particular day I need to be organised, and often end up reading a few hundred patient files a week to ensure that they are booked correctly and have orders for all the imaging they need before their appointments.

One of my favourite parts of the role is working up in the clinics. There I get to interact with patients, attending wound dressing and assisting with casting; a skill I'm sadly not a natural at. I also oversee the overall running of the clinic and in true liaison style I try and solve problems before they escalating when necessary. I am so proud to work along-

side all the brilliant doctor and nurses who make running these clinics possible, and love the challenge the role throws at me on a daily basis.





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The effectiveness of masks



Objects found in casts

John Kinealy



Pen pushed into a cast and the the pen lid got trapped in the cast resulting in a pressure area



Knives pushed into a cast, the image on the left is the lateral side and the image to the right is the medial side. This was the result and the patient claimed he had inserted the knives the night before.

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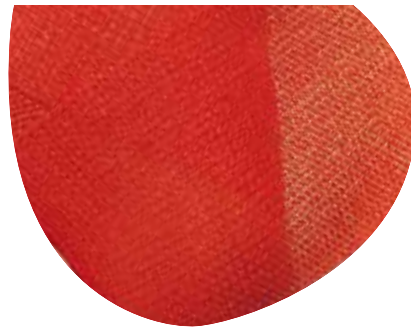
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LOW INTENSITY PULSED ULTRASOUND
FOR FASTER FRACTURE HEALING.

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Designed with ease of application and patient comfort in mind, synthetic casting materials come in fibreglass and polyester varieties. More durable casts, with high conformability, fast setting times and load bearing after just 20 minutes, drive patient compliance.

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- Delta-Cast® Prints
- Delta-Cast® Soft
- Delta-Lite® Plus



Always follow the directions for use.

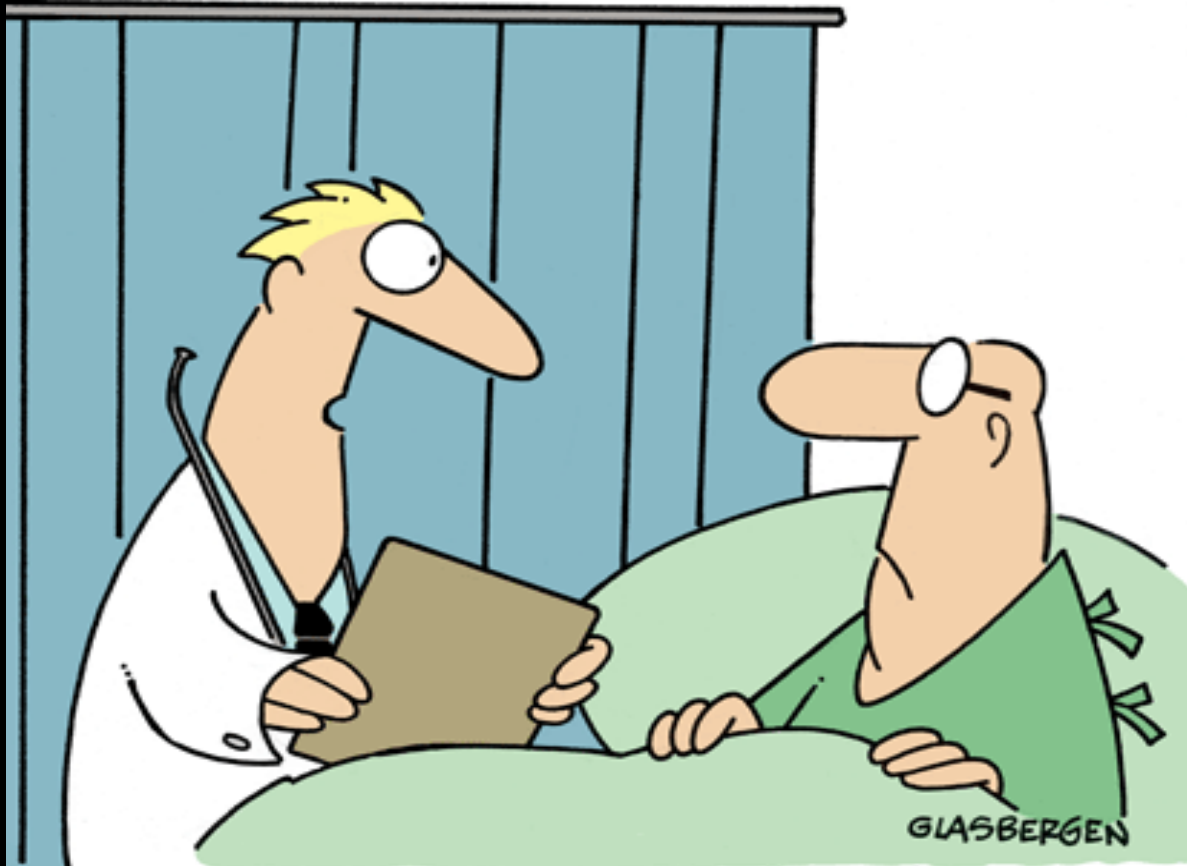


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Customer Service New Zealand
T 0508 276 111 F 0508 998 830

Delta-Cast®



“Age, cholesterol, hypertension, diabetes have all taken their toll on your heart, but the primary damage was done by an ex-girlfriend 60 years ago.”



“I think today is Wednesday, but I’ll need to run some tests to be sure.”

Webril™ II Undercast Padding

100% COTTON.

Webril™ II 100% Crimped Cotton Undercast Padding



The natural fibre content of **Webril II** makes padding easier to apply than synthetic materials. While the cohesive properties prevent product from slipping.

Natural adherence makes it easy to pad bony prominences without leaving uncomfortable wrinkles.

Holds together well even when wet, yet will tear easily when molding to the limb.

No shrinkage with Webril II Undercast Padding means less chance of constriction. Due to the crimped finish of Webril II, optimal cushioning and bulk are achieved. Webril II also has more open surface area, keeping the patient even cooler.

- Ideal for use with synthetic and plaster casting material
- Retains consistency wet and dry
- Combination of mild stretch and cohesiveness, holds padding in place without shifting or bunching
- Available in a sterile blister pouch for postoperative casting applications



4152

Ordering Information

Webril™ II - Sterile
100% Crimped Cotton Undercast Padding

Code	Description	Per Bag
Sterile in Soft Pouch		
2666	Sterile Padding 5cm x 3.6m	50 Rolls
2754	Sterile Padding 7.5cm x 3.6m	50 Rolls
2847	Sterile Padding 10cm x 3.6m	50 Rolls
2944	Sterile Padding 15cm	24 Rolls

Webril™ II - Non Sterile
100% Crimped Cotton Undercast Padding

Code	Description	Per Bag
Non-sterile, Bulk		
4095	Non-Sterile Padding 5cm x 3.6m	24 Rolls
4152	Non-Sterile Padding 7.5cm x 3.6m	12 Rolls
4221	Non-Sterile Padding 10cm x 3.6m	12 Rolls
4519	Non-Sterile Padding 15cm x 3.6m	6 Rolls