

Chapter 22: Skin Care and Prevention of Wounds

Applying a Dry Nonsterile Dressing			
		Name:	
		Date:	
<i>Remember to promote:</i>			
Dignity • Independence • Individualized Care • Preferences • Privacy • Safety			
Pre-Procedure	S	U	Comments
1. Review the procedure with your supervisor.			
2. Identify the client, according to employer policy.			
3. Explain the procedure to the client.			
4. Allow time for pain medication to take effect (injectable medication may begin to work within minutes, but oral pain medication may take at least 1 hour).			
5. Provide for the client's fluid and elimination needs.			
6. Practise proper hand hygiene.			
7. Collect the following supplies:			
<input type="checkbox"/> Gloves			
<input type="checkbox"/> Personal protective equipment, as needed			
<input type="checkbox"/> Tape			
<input type="checkbox"/> Dressing, as directed by the care plan			
<input type="checkbox"/> Dressing tray, as directed by the care plan			
<input type="checkbox"/> Clean, small gauze squares to wipe wound area, as directed by the care plan			
<input type="checkbox"/> Normal saline to clean the wound, as directed by the care plan			
<input type="checkbox"/> Adhesive remover			
<input type="checkbox"/> Scissors			
<input type="checkbox"/> Leak-proof plastic bag			
<input type="checkbox"/> Bath blanket or clean sheet			
8. Provide for privacy.			
9. Arrange items on your work area.			

10. Raise the bed to a comfortable working height. Follow the care plan for bed rail use.*			
Procedure	S	U	Comments
11. Lower the bed rail near you, if it is up.			
12. Help the client to a comfortable position.			
13. Cover the client with a bath blanket or clean sheet. Fan-fold the client's top linen to the foot of the bed.			
14. Expose the affected body part, leaving the rest of the client as covered as possible.			
15. Make a cuff on the plastic bag. Place it within reach and in a place that avoids crossing over the wound with soiled wipes.			
16. Wear a gown and mask if necessary as directed by the care plan.			
17. Put on gloves.			
18. Remove tape by holding the skin down and gently pulling the tape toward the wound. Avoid lifting the tape to remove it, but rather peel away the tape closely to the client's skin. <i>Pulling the tape toward the wound is more comfortable for the client than pulling away from it, as is peeling it closely to the client's skin. These steps can also reduce the chance of reopening the wound if it has not yet healed.</i>			
19. Remove adhesive from the skin. Wet a 10 × 10 cm (4 × 4 in.) gauze dressing with the adhesive remover. Clean away from the wound.			
20. Remove the gauze dressing. Start with the top dressing. Keep the soiled side of the dressing out of the client's sight.			
21. Place the dressing in the leak-proof bag. It must not touch the outside of the bag.			
22. Remove the dressing directly over the wound very gently.			

23. Observe the wound and drainage (see Box 22.5 on page 497). Avoid showing the drainage to the client.			
24. Remove gloves. Put them in the bag. Practise proper hand hygiene. (If used, raise the bed rail before leaving the bedside. Lower it when you return.)			
25. Open the dressing tray. Unfold the clean or sterile wrapper and ensure it stay opens.			
26. Pour the normal saline into the dressing tray, being careful not to splash it on the wrapper.			
27. Open the small gauze square package and, using the forceps supplied in the dressing tray, place five or six squares onto the dressing tray or on the clean wrapper, staying as close to the centre of the wrapper and the tray as possible.			
28. Cut the length of tape needed.			
29. Put on clean gloves			
30. Using either the forceps supplied in the dressing tray or your clean, gloved hand, pick up a small gauze square. Dip it into the normal saline solution.			
31. Wipe the wound in one long stroke down the middle of the wound from top to bottom. Discard the gauze square into the leak-proof bag. If you are using a cleaning cloth, use a fresh corner for each stroke you use. Do not touch the wound again with a soiled gauze square or cleaning cloth.			
32. Wipe down the middle of the wound again and then on either side of the wound.			
33. Apply dressing, as directed by the care plan			
34. Secure the dressing in place. Use tape.			
35. Remove your gloves. Put them in the bag. Practise proper hand hygiene.			
Post-Procedure	S	U	Comments

36. Provide for safety and comfort.			
37. Cover the client and remove the bath blanket or clean sheet.			
38. Place the call bell within reach.*			
39. Return the bed to its lowest position. Follow the care plan for bed rail use.*			
40. Remove privacy measures.			
41. Discard supplies into a leak-proof bag. Tie the bag closed. Dispose of the bag, according to employer policy.			
42. Clean your work surface, according to employer policy.			
43. Practise proper hand hygiene.			
Report and Record your actions and observations, according to employer policy.			
<i>*Steps marked with an asterisk may not apply in community settings.</i>			