

SUBJECT: WOUND CARE PROTOCOL	REFERENCE # 120
DEPARTMENT: SANTA BARBARA ADMHS PSYCHIATRIC HEALTH FACILITY	PAGE: 1
	OF: 1
APPROVED BY: Infection Control Review Committee	EFFECTIVE: 05/07
	REVISED:

INTRODUCTION: Patients may be admitted to the PHF with minor skin wounds, resolving old lacerations and skin infections. Universal Precautions will be observed when staff cleans and dresses these lesions to prevent cross contamination of potentially contagious organisms. A patient with a wound that requires extensive, frequent dressing changes, orthopedic pin care or whirlpool treatment is considered beyond the scope of practice of the PHF and will not be admitted.

EQUIPMENT

- Latex or no latex gloves
- Dressing tray with sterile dressing material
- Medicated ointment as prescribed
- Sterile Normal Saline – for dressing changes, without preservatives
- Red Biohazard waste container

PROCEDURE

- Procedure is done in the treatment room
- Wash hands
- Have patient sit on exam table in a position that will allow access to the wound.
- Loosen tape or other outer dressing
- Don gloves
- Remove dressings and discard in Biohazard container.
- Open sterile 4X4 without touching the gauze, lay the wrapper flat on the counter
- Open the Sterile Normal Saline and pour an amount onto the 4X4 to moisten it.
- With gloved hand use the 4X4 to cleanse the wound and surrounding skin to remove any exudate.
- Apply any medication that is ordered.
- Redress the wound with sterile dressing or wet to dry dressing if ordered using the Normal Saline.
- Secure the dressing with tape or tape and kerlix, whatever is appropriate for the size of the wound.
- Discard and replace the paper on the exam table in the trash.
- **Date and time** the Normal Saline container. Discard it after 24 hours.
- Discard gloves in the BioHazard container if contaminated with blood.
- Make sure that there are supplies available for several days of dressing changes.

DOCUMENTATION

- Status of wound – color, size configuration, presence or absence of bleeding or exudate, approximation of the edges of the wound, condition of the stitches or staples.
- Cleansing solution used and if wet to dry dressing was applied
- Medication used
- How patient tolerated the process.