Mosby's Nursing Video Skills

Procedure Guideline for Irrigating Wounds

1. Before irrigating a wound, check to see what kind of solution the provider has specified in the order.
2. Gather the necessary equipment and supplies.
3. Perform hand hygiene, and provide for the patient’s privacy.
4. Introduce yourself to the patient and family, if present.
5. Identify the patient using two identifiers, such as the patient’s name and birth date or name and account number, according to your agency’s policy. Compare the identifiers with the information on the patient’s identification bracelet.
6. Check prior nursing notes for previous wound assessments.
7. Form a cuff on a waterproof biohazard bag, and place it near the bed.
8. Apply clean gloves. Adjust the patient’s gown and bedding to expose the wound only. Remove the dressing and dispose of properly.
9. Assess the wound before you begin irrigation. Refer to the video skill “Assessing Wounds.”
10. Wear a gown and goggles to protect yourself from any splashes or spray.
11. Place a container of irrigant/cleansing solution in a basin of hot water to warm the solution to body temperature.
12. Position the patient to permit gravitational flow of the irrigation solution into the collection receptacle. The wound should be perpendicular to the collection basin.
13. Protect the bedding by slipping a waterproof pad or an extra towel under the patient.
14. Open the irrigation kit and apply sterile gloves.
15. To irrigate a wound with a wide opening:
   A. Fill a syringe with the prescribed irrigation solution.
   B. Attach a sterile 19-gauge angiocatheter or sterile 19-gauge needle to the syringe.
   C. Set the collection basin on the pad.
   D. Hold the syringe tip 2.5 cm (1 inch) above the upper end of the wound.
   E. Using steady, continuous pressure, flush the wound. Refill the syringe, and continue flushing until the solution that drains into the collection basin is clear.
16. To irrigate a deep wound with a very small opening:
   A. Use an already prepared catheter syringe or attach a soft catheter to a filled irrigation syringe.
   B. Gently insert the catheter tip into the wound opening to a depth of 1 cm (about 0.5 inch).
   C. Flush the wound using slow, continuous pressure.
   D. Move the syringe around being sure to irrigate all parts of the wound. As you irrigate, be sure not to contaminate other aspects of the wound.
   E. Refill the syringe if necessary. As with a shallow wound, you will continue to irrigate until the solution from the wound is clear.
17. To irrigate a wound with a handheld shower:
   A. Perform hand hygiene, and apply clean gloves. With the patient seated comfortably in a shower chair, adjust the shower spray to a gentle flow of warm water.

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B. Hold the shower head 30 cm (12 inches) from the wound, and flush the wound for 5 to 10 minutes.
C. Dry the patient after his or her shower, and help the patient dress and return to bed.

18. When indicated, obtain wound cultures after cleansing the wound.
19. Dry the wound edges with gauze.
20. Apply the appropriate dressing, label it with the time and date, and initial it.
21. Remove your personal protective equipment.
22. Apply clean gloves. Dispose of all used equipment and soiled supplies. Leave the patient’s room tidy.
23. Remove your gloves, and perform hand hygiene.
24. Help the patient to a comfortable position, and place toiletries and personal items within reach.
25. Place the call light within easy reach, and make sure the patient knows how to use it to summon assistance.
26. To ensure the patient’s safety, raise the appropriate number of side rails and lower the bed to its lowest position.
27. As part of your follow up care, inspect the dressing periodically according to agency policy.
28. Document and report the patient’s response and expected or unexpected outcomes, characteristics of the wound, any drainage, and cultures obtained according to agency policy.