

HHF - PROCEDURE

ORIGINAL DATE: 09/02

REVISION DATE:

05/13

SUBJECT: NON-MOISTURE RETENTIVE DRESSINGS

PURPOSE: To wick away excessive drainage.
To cover a wound.
To facilitate mechanical debridement.

Considerations

Nonmoisture-retentive dressings include all gauze-type dressings (gauze 4x4s, 2x2s, Nugauze, Iodoform gauze etc.). In order to provide a moist wound environment, gauze type dressings have to be changed twice a day. In order to provide mechanical debridement, gauze dressings are allowed to dry out, and then are removed without adding moisture to facilitate removal, therefore allowing for necrotic tissue to be removed mechanically from the wound with dressing removal. This type of dressing is not ideal for wound care as the frequency of dressing change increases the risk of contamination/infection, lowers the wound bed temperature each time the wound is open to air, causes pain upon removal and is a non-selective debridement potentially causing damage to healthy granulation tissue.

Supplies/Equipment

Clean gloves, wound cleansing or irrigation supplies; non-moisture retentive dressing which is large enough to cover or pack the wound, normal saline if ordered to moisten dressing; clean scissors to be used if the dressing needs to be cut to fit a particular area; plastic bags for disposal of old dressing; clean towel to dry the skin after cleansing.

Procedure

1. Follow clean technique procedure for assessment and treatment of the patient including dressing change.
2. Carefully remove and discard old dressing. After hand washing, don appropriate personal protective equipment.
3. Cleanse or irrigate the wound according to the physician's order.
4. Dry the surrounding skin and assess the wound.

5. Dress or pack the wound lightly as indicated by wound dimensions, presence or absence of tunneling and/or undermining, with the non-moisture retentive dressing. Cover with appropriate secondary dressing (Kerlix, ABD, adhesive permeable cover dressing such as Alldress).
6. Secure dressing as ordered.
7. Discard all disposable materials in the plastic bag, assure that it is discarded in a second plastic bag according to agency policy.
8. Clean reusable materials.
9. Document findings and update plan of care as necessary.
10. Follow-up: Change dressing at least once a day or when leakage of exudate occurs, according to physicians order. This type of dressing may require dressing changes up to three times per day depending on the type of wound, amount of exudate and presence or absence of infection.
11. Do not moisten old dressing to remove since mechanical debridement will not occur.

Approved Policy Committee: 09/13/05