

# [Surgical wound care essay sample](https://assignbuster.com/surgical-wound-care-essay-sample/)

Types of Wounds
\* According to how they are acquired
\* Abrasion, laceration, cut/incision, trauma
\* According to the degree of wound contamination
\* Dependent for how the is the wound, if there is any antibiotic, other treatments
\* According to depth
\* Dermis, epidermis, subcutaneous, muscle
Purpose
\* Promote wound healing
\* To promote optimal condition

Factors affecting wound healing
\* Developmental considerations
\* Nutrition
\* Lifestyle
\* Medications
\* Infections

Complications of Wound Care Healing
\* Hemorrhage
\* Hypovolemic Shock
\* Hematoma
\* Infection
\* Dehiscence with possible evisceration

Types of Dressing
\* Gauze
\* Synthetic Dressings
\* Hydrocolloids
\* Foams
\* Alginates
\* Hydrogels

Modes of Applying the Drainage
\* Dry to dry
\* Use clean gauze
\* Pat dry inner to outer
\* Wet to dry
\* Use the sterile bowl
\* Place sterile gauze
\* Put NSS to the gauze at the sterile bowl
\* Prepare another sterile gauze. Maintain it dry.
\* Use 2 forceps. Grab the end of the gauze with forcep A, then another end with forcep B \* Pigain ng hindi gumagamit ng kamay. Only rolling the forceps \* Place the wet gauze at the wound site

\* Then cover the wet gauze with a dry gauze.
\* Wet to damp
\* Wet to wet

Kinds of Wound Drainage
\* Serous exudate
\* Clear in color
\* Purulent exudate
\* Yellowish
\* Might need the swab
\* You do not need to clean the area when you are going to get a sample / culture \* Sanguineous exudate

Wound Drains
\* To excrete excess fluids and promote healing
\* Jackson Pratts
\* Do not kink when draining
\* Penrose drain
\* To drain excess fluids
\* Pin – to hold in place
\* Serve a stopper
\* T-Tube
\* Hemovac
\* Gomco Suction Device

Change of Dressing
\* First 24 hours, post op dressing do not touch because it is a pressure dressing \* For preventive measures
\* Type depends upon the type of wound that you patient has. \* Principle: CLEAN TO DIRTY
\* Inscision site is the cleanest area
\* Sterile dry dressing
\* Use of antiseptic and then apply dry gauze
\* Before you change the dressing, check first condition of the patient \* Post op site is worse, call the physician
Methods
\* Sterile technique
\* Clean Technique

Abdominal Binder
\* For post op abdominal surgery
\* Scultetus Binder
\* Cloth only
\* OB Case – top to bottom (involution)
\* Post Abdominal Surgery – bottom to top (to tighten the abdominal muscles)

Care of the Unconscious
\* Eye Care
\* Make a mitten (to avoid the drip of the excess fluids of the patient, to prevent in drying easily of the washcloth, inner to outer) \* Moisten the muta first before removing it
\* Unconscious client = diminished blinking reflex apply eyepad \* In applying eye drips hyperextend the neck to lessen blinking reflex \* Non dominant to lower the conjunctive, dominant hand to squeeze the eye drop \* After placing the solution, tell the patient to close the eyes gently, rotate the eyeballs \* Eye ointment inner to outer canthus

\* Ophthalmic solution first then eye ointment
\* Oral Care
\* Toothette
\* Position of patient
\* Conscious = semi fowlers
\* Unconscious = side lying, flat or supine while the head is on the side (to promote drainage of secretions) \* Place the towel on the chest
\* Patient has artificial dentures
\* Use the padded tongue depressor or toothette (only foam) \* Dip on the water then press on the side
\* Use as a tooth brush
\* Artificial dentures
\* Brush it
\* Conscious patient
\* Semi fowlers
\* Place kidney basin at the chin part
\* Unconscious
\* Do not place the artificial dentures
\* Dentures = place in an opaque container with water (to keep it moisturize, keep from dryness) \* Make sure not to forget the suction machine is always available at bedside \* Can apply petroleum jelly

\* Nasal Care
\* Use cotton buds
\* Can moisten with salinase
\* Treatment of Pressure Ulcers
\* Stage 1
\* Reddened, hard
\* Stage 2
\* Stage 3
\* Stage 4
\* Apply antiseptic solutions, antibiotics
\* flushing
\* Pinakamadumi ang insertion site kapag draigage – so inner to outer

Psoriasis
\* Use of potassium permanganate
\* Use gloves
\* Has drying effect
\* Use tap water, then place small bits of potassium permanganate (will turn purple, but it should be light pink)

Post Mortem Care

Signs of Absolute Death
\* CBF(Cerebral Blood Flow)
\* Normal cerebral blood flow study showing cranial space filled with blood \* Flat EEG
\* Cerebral blood flow study showing no blood entering the brain

Body Changes after Death
\* Algor Mortis
\* Rigor Mortis
\* Livor mortis

Post Mortem Care
\* Talk to it even when it is already dead
\* Give some time to grief
\* After some time, tell the family that you have to prepare the patient \* Accomplish the cadaver form
\* Time of death
\* Give it a bath
\* Oral care
\* Nasal care
\* If for autopsy
\* Cut all the tubes, do not remove
\* It not for autopsy
\* Remove all

Death related Rituals and Funerals of selected religious groups \* Muslim
\* Dying person must confess sins and ask forgiveness in presence of family, family washes and prepares body and turns body towards Mecca \* Judaism
\* Body ritually washes by members of ritual burial society; burial as soon as possible \* Lutheran, Methodist, Presbyterian
\* Roman Catholic