



SECTION 9: WOUND CARE

9.3 Dressings

9.3.1 Simple Dressing

Aims

1. To promote wound healing.
2. To promote patient comfort.
3. To protect the wound from contamination or trauma.

Key points

1. Use aseptic non touch technique for all dressings and wound care. Refer to [ANTT Wound Care protocol](#).
2. There is evidence to support the use of irrigation as the preferred method for wound cleansing¹⁻⁴ and should be utilised where clinically appropriate.
3. For appropriate dressing selection refer to [a guide to choosing the appropriate dressing](#).
4. Consider need for appropriate comfort measures/pain control. Analgesia should be administered at least 30 minutes prior to procedure if required.

Equipment

70% Alcohol (for decontaminating trolley	± Sterile scissors
Dressing pack	± Sterile forceps
Dressing trolley	± Special dressings
Sterile swabbing solution (sodium chloride 0.9% ^{5,6})	± Bandages
Disposable gloves	± Adhesive tape
Bag to dispose of used items	± Skin protection product eg. No sting barrier wipe

Steps	Additional Information
Perform hand hygiene and prepare equipment following steps of ANTT.	
Remove the dressing and discard.	
<p>Irrigation Technique</p> <p>Use a 30mL syringe with a large bore needle (18g or 19g) filled with normal saline to slowly irrigate the wound.</p> <p>Hold the syringe just above the wound's top edge, and flush fluid into the wound slowly and continuously.</p>	<p>Wound cleansing can be safely and effectively achieved using a pressure of 4-15psi.</p> <p>Use enough force to flush out debris, Irrigate all portions of the wound. Do not force solution into the wound's pockets. Continue irrigating until the solution draining from the wound's bottom end is clear.</p>
<p>Swabbing Technique</p> <p>Working from the inside to the outside of the area and dealing with the cleaner parts first, swab the wound with normal saline until it is clean.</p> <p>Use each swab once only.</p>	<p>If using hands and not forceps to hold the gauze swabs, wear clean gloves.</p> <p>For cavities or complex wounds consider irrigating with sodium chloride.</p>
Dry area with a dry gauze swab.	Do not use cotton wool as this can deposit strands that will stick to the cleaned area.
Inspect the wound at each dressing change for; signs and symptoms of deterioration, infection and/or pain/discomfort.	
<p>Apply new dressing.</p> <p>Note: Consider use of skin protection product to protect peri wound skin eg. no-sting barrier wipe.</p>	Secure with tape if required.
Document the findings in the patients' medical record.	Review wound assessment tool if wound/dressing choice changes.
Report any concerns to the treating clinician's team promptly.	


Related documents
Wound Assessment, Dressing Selection and Cleansing Solutions.
Wound Management Emergency Department Guidelines

References:

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