

## Dressing Change Guideline

1. Get all supplies in patient care area-should have dressing change kit
2. Wash Hands
3. Put on clean gloves
4. Remove all dressings **except** steri-strips. While removing tape, be sensitive about the removal of tape in hairy areas.
5. The dressings can be put in regular trash **unless** it is dripping or flaking dry blood, then it must be put into a hazardous waste bag.
6. Inspect the incision for signs of infection. Patients with any of the following should return to Orthopedics or Urgent Care immediately: increased redness, sharp increase in pain without any explanation, drainage from the wound or a sudden increase in swelling at the knee or hip.
7. Inspect the steri-strips, if they are dry and remain adherent to the skin, leave them in place. If they are wet with blood and not holding skin together, change them as follows: Remove old steri-strips. Pull the incision together as you place the new steri-strips perpendicular to the incision.
8. Scope sites should be covered with band-aids.
9. Use gauze and tape or gauze and kling/flexible gauze wrap for the ACL reconstruction patients. Do not use tegaderm. For patients with a TKR, use 3"x8" non-adherent gauze and tape over incision.
10. Remove gloves
11. Wash Hands
12. Do not provide additional dressing supplies for home use. Patients may obtain more supplies at the Pharmacy or local drugstores.

**Tacoma surgeons do their own dressing changes, except Dr. Mapes, for some shoulder protocols. His instructions are in the comments section of the appropriate protocol.**

### **\*\*Added 5/14/15 for BVU Surgeons**

Overlake Hospital has begun using a bandage called an **AquaCel** bandage for all their total joint patients (shoulder/knee/hip). It is a brown dressing that covers the entire length of the incision. The bandage is meant to be waterproof so that the patients can shower with the bandage on. It is supposed to be left on the knee for 7 days. The

patients are given 1 replacement bandage when they are discharged from Overlake Hospital. If the bandage becomes compromised, it needs to be taken off and either covered with our gauze(2 x 4 )dressings or replaced with the replacement given to them at discharge from Overlake Hospital. If they have to use a gauze bandage, they will not be able to shower until the staples are removed. Group Health will not be stocking these bandages, so we won't be able to give the patients any replacement bandages if theirs has to be removed before the 7/14 day schedule.

Our surgeons are still in the evaluative process and are currently deciding if they will continue to use these bandages but, in the meantime, you may see them on any TSR, THR and TKR from Bellevue.

#### PATIENT EDUCATION:

Showering-Patients should check with their MD

- Dr. Honari: All knee scopes can shower 48 hrs postop. All others (ACLs, RCR, Bankarts, etc.) can shower 72 hrs postop.
- Dr. Honari: all dressings changed and new steris placed at postop PT visit and to instruct patients that they can shower with above guidelines. Patients can remove all dressings and new steris 2 to 3 days afterwards (usually by postop day 5-6).
- Dr. Chi: patellar tendon autograft, the wound needs to be kept clean and dry until at least 7-10 days.Or any open shoulder or knee case.
- Dr. Antoine: Patients may shower after the PT dressing change appointment for shoulders. Patients can shower after the 2 week post op MD visit for ACL reconstructions. If they shower before that visit, the wound and dressing must be covered completely with plastic and not gotten wet. Kling/flexible gauze wraps should be instead of tape on extremities when the wrap would stay in place.
- Dr Amann: TKR dressing changes may be done by placing a 3"x8" non-adherent gauze under the thigh-high TED hose. No need for tape that way since the stocking holds it in place, so blisters are avoided.

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