


Clean Dressing Change Checklist

- **F686**-Clean technique (also known as non-sterile) involves approved hand hygiene and glove use, maintaining a clean environment by preparing a clean field, using clean instruments, and preventing direct contamination of materials and supplies.
- Clean technique is considered most appropriate for long-term care; for residents who are not at high risk for infection; and for residents receiving routine dressings for chronic wounds such as venous ulcers, or wounds healing by secondary intention with granulation tissue.

TASKS	
➤ Review orders and verify resident. Determine if orders include pain management; premedicate if needed. Cart remains locked, outside the room, HIPPA compliant with papers and computers.	
<ul style="list-style-type: none"> ➤ Assemble equipment and supplies (e.g. dressings) and place on barrier. ➤ Don PPE for EBP requirements per CMS Regulation states <u>ALL</u> wound that need a dressing requires <u>EBPs</u> – Notifications should be on the door regarding EBPs. ➤ Take supplies on barrier into room. Place garbage receptacle near workstation. ➤ Perform hand hygiene: Disinfect any shared equipment, (e.g.) scissors, prior to placing them on clean barrier. Open dressing package, write date, time and initials on cover dressing or tape. 	
➤ Re-evaluate resident's pain prior to beginning procedures. Explain the procedure, obtain verbal consent.	
➤ Position patient comfortably. Expose area to be treated. Place barrier under wound.	
➤ Hand Hygiene: Remove dressing and discard into resident's trash can. Remove gloves, hand hygiene, new gloves	
➤ Cleanse wound per order. Cleanse from the inside out using new gauze, saturated with wound cleanser or antimicrobial wash for each cleansing swipe. Complete wound cleansing includes wound bed, wound edge and periwound area. Perform hand hygiene	
➤ Wound assessment with measurements. Remove gloves and perform Hand Hygiene.	
➤ Apply clean dressing as ordered, ensure dressing is dated and initialed.	
➤ Discard all disposable items into appropriate receptacle.	
➤ Remove gloves perform Hand Hygiene	
➤ Reposition resident, ensure the call light is in place. Check in with resident and educated as needed. E.g. elevate legs above heart to help control edema.	
➤ Remove contaminated trash from resident's room.	
➤ Perform Hand Hygiene.	
➤ Comments:	

Please see the complimentary **Generic Dressing Change Guideline** document that describes these tasks in detail. These documents are examples of Dressing Change Guidelines and a Check List that can be customized to facilities' organizations' protocols

This information is provided for informational purposes only. Patient care decisions should be based on relevant clinical guidelines, including current evidence-based literature, state and federal guidelines (CMS), and facility protocols. Decisions for wound management should be based on a holistic review of the patient's clinical condition. The clinical team members are encouraged to rely on their training and expertise, as well as all available clinical and other pertinent information, prior to making treatment decisions for any individual patient.