Wounds Canada has developed this simple wound assessment and treatment guide that can be used by patients and their caregivers when doing dressing changes at home.

Are you providing wound care at home without hands-on help from a health-care professional? You may be changing your own dressings or changing the dressings of someone else. Each dressing change gives you a chance to check if the wound is healing, staying the same or getting worse and if you need to call in the experts for help.

Here is a simple, step-by-step process you can use at home:

| 1 | Prepare yourself and your supplies |
| 2 | Wash your hands |
| 3 | Remove and dispose of the dressing |
| 4 | Wash your hands again |
| 5 | Clean the wound |
| 6 | Assess the wound and surrounding skin |
| 7 | Apply a new dressing |
| 8 | Wash your hands again |
| 9 | Follow up – what's next? |

Disclaimer: The content in this resource is for informational purposes only and is NOT a substitute for professional medical advice, diagnosis or treatment. You should always consult with your health-care professional before starting any new treatment or changing or stopping an existing treatment.
Prepare Yourself and Your Supplies

WHERE:
a. Choose a location in your home to perform the dressing change. It should have good lighting, adequate space, access to running water, a hard surface like a countertop (not the floor or a bed) and be away from children and pets. This location is your “workspace.”
b. You or the person with the wound should be comfortably located near the workspace.

SET-UP:
c. Turn on the lights in your workspace, turn off any fans and close all windows.
d. Place a garbage bag near your workspace.
e. Clean the hard surface you have chosen (e.g., the countertop) with an antibacterial surface wipe. If you do not have an antibacterial surface wipe, clean the surface with a clean cloth and warm, soapy water.

PREPARE AHEAD:
f. Place the dressing supplies you will need on your clean, hard surface. The dressing supplies you will need will depend on the type of dressings you are using. Use the Supplies Checklist on page 11 as a guide.
g. Carefully read the instructions on the dressing packages OR review the instructions given to you by your health-care professional (usually a nurse, doctor or pharmacist). It’s best if you have been able to watch your health provider apply and remove a dressing to the wound at least once to be sure you can repeat it, but it is not necessary. Most dressings are easy to apply and remove if you follow the instructions.

Tips:

• Ideally your home care nurse has left you with a disposable dressing tray that can be used to assemble your dressing supplies. After each use it should be washed with soap and water, rinsed and left to air dry.
• Do not boil any instruments that may be in the tray.
Wash Your Hands

Hand washing with soap and water is best!

**WET:**
a. Wet your hands with lukewarm water and then apply a small amount of soap to one palm. (Remove rings prior to washing.)

**WASH:**
b. Wash both palms, backs of hands, between fingers on both sides, the fingertips and then the thumbs. Sing the “happy birthday” song twice to make sure you have taken enough time.

**WIPE:**
c. Dry your hands well with a paper towel or clean towel and then use the towel to turn the tap off.

What about hand sanitizer?
You can use alcohol hand sanitizer (60% or higher alcohol content) to replace hand washing if clean, drinkable water is not available. You can also use it after hand washing. The procedure is the same for hand washing with soap: squirt a small amount of sanitizer on one hand and then spread to the other hand.

**Note:** Hand washing is preferred after using the toilet or if hands are visibly dirty.

**Tips:**
- Take a look at this short video on hand washing: www.youtube.com/watch?v=IisgnbMfKvi
- After using an alcohol hand sanitizer five or six times, use soap and water to remove the film that gets left behind from the sanitizer.
Remove and Dispose of the Dressing

PREPARE:
a. If you have access to clean medical gloves, put them on.

REMOVE:
b. Take the old dressing off carefully by gently lifting the edge and moving around the edges of the dressing until the entire dressing is off. Be careful to avoid causing injury to the wound and skin around the wound.
c. Look at the dressing and answer these questions:
   • Did the dressing stay on or was it lifting at the edges?
   • Did the dressing leak through or did it contain all of the fluid coming from the wound?
   • Was the dressing comfortable to wear or should it be applied in a different way?
   • Did the dressing cause any pain during removal?
   • Did the dressing cause any injury to the wound or the skin around the wound when it was removed?

Problems? If the dressing is the cause of any of these problems call your health-care professional.

DISPOSE:
d. Place the soiled dressing in the plastic bag. If you had put on clean medical gloves, remove them and place them in the plastic bag.

Tips:
- If you have small children or animals, make sure the dressing is placed in a secure container they cannot get into.
- If you have difficulty removing the dressing because it is stuck to the wound, re-moisten the wound with wet gauze or paper towel or use a commercial wound cleanser spray.
- If the tape or adhesive part of the dressing is tearing the surrounding skin as you take it off, slow down and peel it off gently and slowly. In the future you may need to avoid using a dressing with the same strong adhesive. Your health-care professional can help you select a dressing with a more gentle adhesive or suggest a different method of keeping the dressing on the wound.
4 Wash Your Hands AGAIN
Wash your hands again the way you did in Step 2.

5 Clean the Wound

SET UP:
a. Place a clean towel under the wounded area to catch any cleansing liquid.
b. If you have access to clean medical gloves, put them on.

CLEAN:
c. Pour the wound cleansing liquid (sterile saline or warm tap water) into the disposable dressing tray (if you have one) or pour it over the wound or spray the wound with the commercial wound cleanser.
   Another option: Put the wound under gentle warm running water from the tap in the sink or tub.
d. With clean or gloved hands (if available) or with forceps from the dressing tray (if available) use a gauze pad* to gently wipe away any wound fluid (drainage) or bits of dressing found in the wound.
e. Repeat these steps (using a new gauze pad each time) until the wound appears clean. You may expect slight bleeding that should stop once cleansing is completed.

DRY:
f. After cleaning the wound, gently pat dry the skin around the outside of the wound using clean gauze or a paper towel.

DISPOSE:
g. Dispose of the all used gauze or paper towel in the plastic bag.

* The gauze pad may be sterile (a single pad in a wrapper) or non-sterile (in bulk wrap). Either type is fine but only use supplies that are clean and unused. You can buy gauze pads at pharmacies and medical supply stores.

Important:
• Only use tap water that is clean and drinkable.
• Do not use antiseptics such as hydrogen peroxide; they can harm a healing wound.
• Do not dip or soak the wound in water.
• If you have received instructions from your health-care professional, follow their instructions instead.
Assess the Wound and Surrounding Skin

EXAMINE:

a. Now that the wound and surrounding skin are clean you can examine them. Use the Patient and Wound Inspection Chart on page 7 to guide you.

WRITE:

b. Print out a page of the Patient and Wound Inspection Charts (3 charts per page).

c. In one of the charts write in the date of the dressing change and, for each question, mark the answer that best describes how you and the wound are doing.

KEEP:

d. Keep all your charts so you have a record of how the wound has improved, stayed the same or gotten worse. This will help you give your health-care professional a clear picture of the progress or lack of progress of your wound.

Tips:

• Take a photo of the wound at each dressing change if you have a digital camera/phone/tablet. This can help you track changes over time, and if you need to contact a health-care professional you will be able to show them what the wound looks like now and in the past. This will help them decide if treatment needs to change.
Worksheet: Patient and Wound Inspection Charts

<table>
<thead>
<tr>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Compared to my last dressing change...</td>
</tr>
<tr>
<td>I am feeling...</td>
</tr>
<tr>
<td>My wound pain is...</td>
</tr>
<tr>
<td>The wound’s size is...</td>
</tr>
<tr>
<td>The fluid (drainage) coming from the wound is...</td>
</tr>
<tr>
<td>The smell from the wound (not the dressing) is...</td>
</tr>
<tr>
<td>The swelling around the wound is...</td>
</tr>
<tr>
<td>The amount of redness around the wound is...</td>
</tr>
<tr>
<td>The temperature of the skin around the wound is...</td>
</tr>
<tr>
<td>The moisture on the skin around the wound is...</td>
</tr>
</tbody>
</table>

- If you and the wound are **BETTER**, continue changing your dressings as usual. Over time you may slowly decrease the number of times you change the dressing as the wound heals.
- If you or the wound is **UNCHANGED** after several dressing changes, contact a health-care professional to see if a change in treatment is needed.
- If you or the wound is **WORSE**, contact a health-care professional **as soon as possible** to see if a change in treatment is required.
Apply a New Dressing

OPEN:
a. Open the dressing package, taking care not to touch the inside of the dressing. Grasp the edge of the dressing and remove it from its package. Make sure the dressing is large enough to cover the entire wound with 2 cm to spare; no adhesive should touch the wound itself.
b. If the dressing is self-adhesive (meaning it will stick to your skin on its own), remove the adhesive protector film.

POSITION:
c. Position the dressing over the middle of the wound and gently press it into place.

PRESS:
d. Gently smooth the adhesive edges down. Make sure there are no gaps where air, water or dirt might get in.
e. If you are using a dressing that is not self-adhesive, place the dressing over the middle of the wound and use medical tape or apply a gauze wrap (wrapped loosely) to keep the dressing in place.

CLEAN UP:
f. After using any equipment (e.g., forceps, scissors, dressing tray), wash in warm, soapy, drinkable tap water or cleanse with an alcohol wipe or antibacterial surface wipe. Use this equipment only for your dressing changes. Store it in a clean, resealable plastic bag in your dressing supply container.
g. If you are wearing clean medical gloves, remove these and place them in the garbage bag.
h. Place any remaining garbage in the garbage bag, close the bag and dispose of it in a garbage bin.
i. Clean your workspace with an antibacterial surface wipe. If you do not have an antibacterial surface wipe, clean the surface with a clean cloth and warm, soapy water.

Important:
- If you are using medical tape to hold the dressing in place, be careful not to stretch the tape when putting it on or it may cause blisters.
- If you are using a gauze wrap to hold the dressing in place, do not wrap it too tightly or you may cut off blood flow.
8. **Wash Your Hands AGAIN**
Wash your hands again the way you did in Steps 2 and 4.

9. **Follow Up**

**QUESTIONS?:**
a. If you are changing someone else’s dressing, ask if they have any questions or concerns.

**REVIEW AND ASSESS:**
b. Discuss or think about whether you need to contact a health-care professional based on what you saw and felt in Step 6. When you looked closely at the wound, was it getting better, staying the same or getting worse? If things are getting worse, contact a health-care professional as soon as possible because it may take time before seeing or talking to someone who can help.

**RE-SUPPLY:**
c. Check your supplies and get/order more if you are running low.
FAQs

1. How often should I change the dressing?
   It depends on many things, including the type of dressing you are using and the type of wound you have. Ideally your health-care professional has given you a schedule for changes. Follow that unless your health-care professional gives you different instructions because of changes to your wound.

2. When will I know if I need to call in expert help?
   Expert help is needed immediately when:
   • You notice an increase in your temperature
   • You feel dizzy, lightheaded or like you may fall
   • You have chest pain
   • You see more redness and/or have more pain in the wound area
   • You see unexpected blood or drainage (fluid) from your wound
   • You see stool (brown) drainage from an abdominal incision
   • You see green pus or drainage that is not expected from your wound

3. My health-care professional told me not to peek at the wound between dressing changes but I’m anxious to see how it’s doing more often. Why can’t I take a look?
   Looking at your wound may be tempting, but opening up the dressing may introduce bacteria into the wound/incision/graft area. Do not peek under the dressing between dressing changes unless there is a problem.

4. Where do I go if I run out of supplies?
   It is important that you have enough supplies, so plan ahead and contact your health-care professional regularly. They will be able to tell you how to get the supplies you need, for example from a pharmacy or medical supply store.

5. What if I don’t have clean water available?
   Clean water is water that is drinkable (also called “potable” water). Look on your Public Health website for information on potable water.
   If clean water is not available your health-care professional may:
   • Ask you to boil water
   • Ask you to get distilled water, sterile water or sterile saline from the store/pharmacy
   • Ask you to get a prepared commercial wound cleanser from the pharmacy or medical supply store

6. When will I be able to stop putting dressings on my wound?
   It may take some time for the wound to close. Share the information you wrote down in your Patient and Wound Inspection Charts at each dressing change with your health-care professional. This information, along with any photos you have taken, will help them decide how often dressing changes are needed (dressing changes may need to be done less often as the wound heals) and if the type dressing needs to change.
## Supplies Checklist
You may not need every item on this list. Check off the ones you will need based on any instructions you have been given, what you have available, or based on your previous experience with the dressing type you are using.

- If possible, store your dressing supplies in a plastic container that has a sealable lid. It should be large enough to fit all your dressing supplies, in good condition, regularly cleaned, and used only for your dressing supplies.
- Store the container in a place that is clean and dry and free from dust, insects and vermin, out of direct sunlight, off the floor and away from heat sources (such as a closet shelf).
- When the time comes to change a dressing, bring your container of dressing supplies to your workspace and select the supplies you will need.
- Print this page and tape it to the lid of your container.

### SET-UP
- Antibacterial surface wipe or a clean cloth and liquid dish soap
- Hand sanitizer or liquid hand soap
- Clean medical gloves (if you have access to them)
- Plastic bag for disposing of items
- Container of dressing supplies
- Disposable dressing tray (if available)

### WOUND CLEANSING
- Clean towel
- Gauze pads or paper towels
- Tap water, normal saline or commercial wound cleanser

### WOUND INSPECTION
- Patient and Wound Inspection Chart (print page 7)
- Pencil or pen
- Digital camera/smart phone/tablet

### DRESSING APPLICATION
- Dressing
- Tape and/or gauze wrap
- Clean scissors
- Alcohol swab for cleaning scissors and forceps
CARE AT HOME SERIES

Caring for Your Wound at Home
Changing a dressing

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