

PROCEDURE

ORIGINAL DATE: 09/02

REVISION DATE:
05/13

SUBJECT: FOAM DRESSINGS

PURPOSE: To provide a moist wound environment. To absorb exudate.

Considerations

The main component of foam dressings is polyurethane foam. Foam dressings come in two types: those with adherent borders and borderless. Borderless foam dressings require tape/secondary dressings to secure them to the surrounding skin. Foam dressings are semipermeable, that is, they are permeable to gases and water. These dressings are available in different sizes. Foam dressings are generally contraindicated for use on superficial or dry wounds.

Supplies/Equipment

Clean gloves, wound cleansing or irrigation supplies; foam dressing which is large enough to cover the wound, exceeding the wound margins by at least 2 cm.; clean scissors to be used if the dressing needs to be cut to fit a particular area; plastic bags for disposal of old dressing; clean towel to dry the skin after cleansing.

Procedure

1. Follow clean technique procedure for assessment and treatment of the patient including dressing change.
2. Carefully remove and discard old dressing. After hand washing, don appropriate personal protective equipment.
3. Cleanse or irrigate the wound according to the physician's order.
4. Dry the surrounding skin and assess the wound.
5. Remove the backing from the adhesive layer of an adherent foam dressing and apply without stretching the dressing or the skin. For non-adherent foam, place the dressing over the wound bed, extending 2 cm over the intact skin. Secure with tape or appropriate secondary dressing. Foam cavity dressings need to exactly fit the wound and should not overlap the intact skin causing possible maceration. Review product package insert to be sure that the dressing is applied according to manufacturer's guidelines.
6. Discard all disposable materials in the plastic bag, assure that it is discarded in a second plastic bag according to HHVNA policy.

7. Clean reusable materials.
8. Document findings and update plan of care as necessary.
9. Follow-up: Change dressing at least once every seven (7) days or when leakage of exudate occurs, according to physicians order. If used under compression dressings, foam should be changed 1-2x/wk when the compression dressing is changed according to physician order.

Reference(s):

1. Mölnlyche Health Care Reference Manual, Mölnlyche Health Care, Inc., Newton, PA, Feb, 2003
2. Mölnlyche Health Care Wound Dressing Selection Guide, Mölnlyche Health Care, Inc., Newton, PA, 2002