EMERGENCY CARE OF WOUND DEHISCENCE AND/OR EVISCERATION

POLICY:

An RN can provide emergent care to a patient experiencing a wound dehiscence.

PURPOSE:

To provide guidance to the nurse for emergent care of a sudden wound dehiscence

SUPPORTIVE DATA:

Wound dehiscence is the sudden gaping separation of all layers of a wound. This may lead to an even more serious complication: evisceration, in which a portion of the viscera (usually bowel loop) protrudes through the insertion. This can lead to peritonitis and septic shock. Wound dehiscence usually occurs 6-7 days after surgery.

EQUIPMENT:

1 Liter of normal saline solution
Sterile irrigation set (basin, solution container and 50ml catheter tip syringe)
Several large abdominal dressings
Linen saver pads
Sterile gloves

PROCEDURE STEPS:

1. Provide reassurance and support to ease the patient’s anxiety.
2. The nurse must stay with the patient at all times. Call for help.
3. Keep the patient in bed, low-Fowlers (no more than 20 degrees elevation) with knees flexed.
4. Notify attending physician, charge nurse and supervisor STAT.
5. Place linen saver pad under patient to keep sheets dry.
6. Cover wound with sterile saline soaked dressing.
7. Every hour; moisten dressings with normal saline and check the color of the viscera. If it is dusky or black, notify the doctor, STAT.
8. Keep the patient NPO.
9. Secure an IV with a large bore needle.
10. Monitor VS every 15 minutes to detect shock.
11. Anticipate NG equipment and suction, pre-op consent forms, pre-op teaching and transport to surgery.
12. Assess level of pain and intervene appropriately.

DOCUMENTATION:

1. Document sequence of events per standard documentation.
2. Include the appearance of the wound or eviscerated organ.
3. Record VS and the patients response to the incident/pain.
4. Change the patient’s plan of care to reflect nursing actions needed to promote proper healing.
5. Write all orders on the physician order form. Sign as “emergency protocol order” / your name and title.

REFERENCE:

See Springhouse 3rd edition pages 201-203