

South West Regional Wound Care Program

My Pilonidal Sinus Wound Self-Care Wound Dressing Guide

Name:	Date:				
 This guide will help you or your caregiver learn how to change your pilonidal sinus wound dressing You need to change your dressing at least daily and each time it gets soiled or wet 					
Steps	Instructions				
Step 1 Gather your dressing supplies	Hand sanitizer (70% alcohol) and antibacterial liquid hand soap Gloves Garbage bag Adhesive remover wipe Tap water or normal saline or sterile water Gauze squares Alcohol wipes Forceps/tweezers Scissors Tape Cling Wound Filler: Wound Covering (the outermost dressing): Other:				
Step 2 Set up	 Choose an area to change your dressing that is comfortable for you, has good lighting, and is away from children and pets, and place your dressing supplies there Wash your hands well with warm water and antibacterial liquid soap for at least 15 seconds. Dry your hands using paper towels Return to the area you have chosen to change your dressing and open and arrange the garbage bag beside you to put your old dressing and garbage in Open the dressing packages that you will need, but take care not to touch the dressings inside. Leave the dressings inside of the packages 				
Step 3 Remove the	 Put on gloves Carefully remove the old dressing and put it in the garbage bag. If instructed by your nurse, use an adhesive remover wipe to help get the dressing off Remove your gloves and put them in the garbage bag 				
old dressing	4. Clean your hands with hand sanitizer				
Step 4 Shower	 Shower. Use a handheld sprayer to gently flush out the inside of the wound and to direct soap, shampoo and loose hairs away from the wound Once you have finished your shower, gently towel dry with a clean towel If required, have someone shave the hair away from around your wound using a disposable razor designed for the bikini area, with a swivel razor head (remove a 5cm wide strip extending at least 2.5cm from all wound edges) 				
	Return to the spot you have chosen to change your dressing at				
Step 5 Clean the	 Put on a new pair of gloves Clean the wound with at least 100mL of room temperature: a.				
wound	Your nurse will instruct you to either: Apply the solution using a prefilled bottle Apply the solution using a 30mL syringe and wound irrigating tip				

4. Gently pat the skin around the wound dry using gauze

5. Paint the skin extending 5cm around the wound with 0.5% chlorhexidine, leaving the

	solution in place for one minute. Allow the solution to air dry					
	6. Apply a barrier wipe to the skin around the wound (not the skin you painted with					
	chlorhexidine though) and allow the skin to air dry					
	NOTE: if you are using a large container of saline or sterile water, date the container when it					
	is first opened and throw out any remaining solution after 24 hours					
	 If not already boiled (if you were so instructed by your nurse), clean your forceps/tweezers and scissors well with alcohol swabs and allow them to air dry Using the forceps/tweezers, grasp the wound filler dressing and cut off the amount you need to fill the wound. Remove this piece from the dressing package Still holding the wound filler dressing with your forceps/tweezers, gently fill the wound with the cut piece of wound filler dressing. Do not fill the wound tight, rather think 'fluffy like a cloud', while making sure to touch all edges of the wound with dressing product. You may need to use a cotton tipped applicator/giant Q tip to help tuck the dressing in 					
	place					
Step 6	 Cover the wound filler with the wound covering dressing as instructed by your nurse If instructed by your nurse, tape the dressing in (be careful to not stretch the tape when 					
Cover the	putting it on or you may cause your skin to blister)					
wound	3. Remove your gloves and put them in the garbage bag					
Wound	4. Clean your hands with hand sanitizer					
	 If you have any leftover wound filler, if instructed by your nurse, place it in a sterile container (like a urine specimen container) using the forceps. Close the container and write your name, the date and the name of the dressing on the container. In future dressing changes, access the remaining dressing pieces from the container using the 					
Step 7	forceps and throw the container and any remaining dressing pieces out after fourteen days					
	 Store all of your dressing supplies in a container with a lid, like a shoe box, banker box, or 					
Clean up	Rubbermaid container. The container chosen should be put in a clean, dry, safe place,					
-	away from the reach of children and pets, like the top of your fridge or a shelf in a closet					
	If you are running out of supplies, i.e. you have less than a week's supply of dressings left, tell your nurse (if they supply you with the dressings) or visit your pharmacy to purchase more (if you buy your own dressings)					
	Call your visiting nurse (if you have one) or your family doctor or nurse practitioner (if you					
	do not have a visiting nurse) if:					
Ctor O	 The amount of drainage increases or becomes thick, green/blue or dark yellow/tan 					
Step 8	There is a new or changed wound odor					
When to call	You develop new or worsening pain in or around the wound					
the nurse	 The wound base develops new or more yellow or black areas/tissue 					
the nurse	The wound gets bigger or new wounds appear around the original one					
	The tissue around the wound appears swollen, red, warm and/or hard to touch					
	You develop a fever higher than 38°C (100°F)					
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Additional Notes:					

Nurse's name (or Doctor's na Nurse's Signature/Status:	me if you do not have a visiting nurse):
Nurse's Telephone Number:	Date: