



POLICY AND PROCEDURE MANUAL CENTRAL VALLEY HEALTH DISTRICT

SECTION: SCHOOL NURSING

POLICY# 610 WOUND MANAGEMENT

POLICY: The school nurse will be available to instruct the school staff on the proper assessment of minor scrapes, cuts, abrasions and slivers in the event that the school nurse is not available to assess the wound. The guidelines for referral for medical treatment of a wound will be followed as outlined in the procedure portion of this policy.

PURPOSE: The proper initial assessment of a wound will assure that medical care (if necessary) of the injury is sought as soon as possible to avoid any complicating effects. If the wound does not warrant medical treatment, the school nurse staff will properly care for the injury.

PROCEDURE:

1. The nurses will gather a **HISTORY** of the injury.
 - How did the injury occur?
 - What caused the injury? (Metal, glass, wood, plants, playground asphalt, dirt, pencil graphite, etc.)
 - When did the injury occur? How long has the wound been bleeding?
 - Has there been any treatment?
 - Is the student on any medication that may interfere with normal bleeding?
 - Does the child have a medical condition that may interfere with the healing process?
 - Did the child get hit on the head?
 - When was the last Tetanus/diphtheria immunization?
 - Are there any other symptoms? IE pain, paresthesia or funny feelings, or weakness.
2. The nurse will do a brief **ASSESSMENT** to evaluate the injury and rule out any further underlying injuries.
 - Inspect the area that is injured-note the type and size of the scrape or abrasion; evaluate the depth of the wound, and the ease of bleeding control.
3. The following **NURSING ACTIONS** will be followed in caring for **CUTS and SCRAPES**:
 - Clean the wound
 - Thoroughly irrigate the wound using water or normal saline.
 - Apply topicals as school policy allows. Topicals do not sterilize the wound, but control bacterial growth.
 - Inform the parents of the injury.
 - Apply a band aid as necessary.

SPLINTERS

- Remove the splinters as soon as possible before they become hidden by swollen tissue or embedded in tissue.



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- Superficial splinters may be washed off. If using a tweezer, wash the area with soap and water. Unless the foreign body is wood, since it will swell with water.
- Make sure there is a good light source, expose the foreign body, grasp it with the tweezers and pull out at the same angle it went in.
- Wash the area with soap and water; apply antibiotic ointment if appropriate.

PUNCTURE WOUNDS

- Assess the history of the injury;
What is the mechanism of injury?
Where is the wound located?
Was it through foam rubber inner soles of foot wear?
When was the last Tetanus shot?
 - Physical Assessment
Evaluate the depth of the wound
Assess the wound and wound area
Assess circulation and motor function distal to the wound
Look for any retained foreign body.
Determine when the injury occurred and assess for signs of infection.
 - Nursing Actions
Clean and irrigate the wound
Notify parent of the puncture wound and refer to primary medical provider.
Determine status of Tetanus immunization.
4. **REFERRAL and FOLLOW-UP** care will be based on the severity of the injury and the findings of the nurse.
 5. Central Valley Health District will supply the Jamestown schools with band aids and triple antibiotic ointment for basic wound cares. Purchase of further wound care supplies is up to the individual school.