

PROFESSIONAL SKILLS II

ISTANBUL MEDIPOL UNIVERSITY INTERNATIONAL SCHOOL OF
MEDICINE



COLLECTING A SWAB SAMPLE FOR WOUND CULTURE

Infection is one of the most important causes of delayed wound healing. Early detection of the microbial agent causing infection and proper treatment is necessary to manage that infection. For detecting microbial agent on the wound, wound sampling should be done correctly.

1. Perform hand hygiene.
2. Introduce yourself to the patient.
3. Confirm the identity of the patient.
4. Prepare the materials needed for the procedure:
 - ✓ The swab containing a tube with the transport medium
 - ✓ Sterile gloves
 - ✓ Cotton balls or gauze pieces
 - ✓ A marker pen
 - ✓ Sterile saline water in a basin
5. Open the package of the swab
6. Write the name of the patient on the tube containing transfer medium.
7. Done sterile gloves.
8. Clean the surrounding of the wound with the cotton soaked with sterile saline water.
9. Discard the cotton to the medical waste.
10. Take the swab without touching to the sterile cotton tip and gently apply it on the wound especially on the areas with exudate.
11. Collect the specimen by rotating the swab.
12. Place the swab inside the tube containing transfer medium.
13. Undo your gloves.
14. Perform hand hygiene.
15. Do non-sterile gloves and dress the wound with sterile gauze and stabilizing tapes.
16. Send the swab to the lab for culture and gram staining.

BLOOD GLUCOSE TESTING USING A GLUCOMETER

1. Prepare the materials needed:
 - ✓ The glucometer
 - ✓ The strips suitable for the glucometer
 - ✓ Wipes
 - ✓ Lancet needles
2. Wash your hands and make sure the patient's hands are clean.
3. Put the strip inside the meter, this will turn on the device.
4. Take the finger from which you are going to obtain blood sample in your hand.
5. Clean the tip of that finger with a wipe.
6. With your other hand, apply the lancet hole on the point you want to puncture.
7. Push the top of the lancet needle keeping it attached on the patient's finger.
8. Scrub the finger gently to obtain the a drop of blood.
9. Clean that drop with a wipe.
10. Scrub again to obtain a new drop of blood.
11. Apply the end of the strip connected to the meter on the blood drop.
12. Automatically the result can be seen on the screen of the meter and recorded.

NASOGASTRIC TUBE INSERTION

Nasogastric tube is a tube inserted through the nose down the throat and esophagus, and into the stomach. It can be used to give drugs, liquids, and liquid food, or used to remove substances from the stomach. It is also called “gastric feeding tube” or “NG tube”.

1. Prepare the materials needed for the procedure:
 - ✓ A nasogastric tube (14-18 French)
 - ✓ Lubricant
 - ✓ 20-50 ml syringe with a catheter tip
 - ✓ A glass of water
 - ✓ A basin
 - ✓ Non-sterile gloves
2. Wash your hands.
3. Elevate the head of the bed at 45-90 degrees.
4. Measure the distance necessary to be inserted using the tube: keep the catheter on the face of the patient holding the tip of the catheter at the of the nose of the patient then elongate it until the ear lobe, then hold that point a the ear lobe and elongate the tube until the xyphoid tip.
5. Mark the reached point of the catheter with tape.
6. Lubricate the first 10 cm of the tube.
7. Done your gloves.
8. Insert the tube through the nose of the patient.
9. Pull the tube aiming the ear of the patient keeping the head of the patient slightly extended backwards.
10. Gently advance the tube towards the patient’s nasopharynx until the resistance is felt.
11. Ask the patient to open his mouth then visualize the tube at the nasopharynx.
12. Gently place the patient’s head into a flexed position and ask the patient to sip several times from the glass of water while advancing the tube until the mark of the tape is reached. During the tube advancement, it is important to keep the tube in contact with the nasal septum and to continuously rotate while advancing.

13. Check whether the tube is inside the stomach:

- ✓ Listen to the gastric area with stethoscope while pushing air with a syringe through the tube
- ✓ Draw some gastric content with a syringe and check for the pH
- ✓ Take a chest x-ray

FOLEY BLADDER CATHETERIZATION

Foley catheter is a flexible tube that a clinician passes through the urethra and into the bladder to drain urine. This catheter has a balloon on its bladder end. After the catheter is inserted into the bladder, the balloon is inflated so that the catheter cannot pull out.

Indications for Foley Catheterization

- Monitoring urine output
- Relief of urine retention
- Neurogenic bladder
- Immobilized/incontinent/intraoperative patient

Contraindications for Foley Catheterization

- Urethral stricture
- Urethral trauma
- Acute urinary tract infection
- Patients with anticoagulation

1. Perform hand hygiene.
2. Prepare the materials required for the procedure:
 - ✓ A proper size Foley catheter (16 or 18 French)
 - ✓ Water absorbent pad
 - ✓ Soapy water in a basin
 - ✓ Cotton balls or gauze pieces
 - ✓ Non-sterile gloves

- ✓ Sterile gloves
 - ✓ Fenestrated drape
 - ✓ Iodine
 - ✓ Sterile pens
 - ✓ Lubricant
 - ✓ Syringe containing sterile saline to inflate the balloon (the amount necessary is written of the end of the catheter where the syringe is to be connected)
3. Place the patient in supine position with the knees flexed.
 4. Place the water absorbent pad under the buttocks of the patient.
 5. Perform hand hygiene.
 6. Done non-sterile gloves.
 7. Cleanse the urethra and perineum in female, urethra and penis in male patient with the cotton balls soaked with soapy water.
 8. Place a sterile sheet under the patient.
 9. Place the fenestrated drape over the patient exposing only the area where the catheter is to be inserted.
 10. Drain iodine in a basin.
 11. Drain lubricant on the sterile pad.
 12. Connect the sterile bag on the catheter.
 13. Connect the syringe filled with saline on the catheter.
 14. Done your sterile gloves.
 15. With your non-dominant hand open labia major and minor in female patient or hold the penis up in a male patient.
 16. With your dominant hand, take a cotton ball using a sterile pens, soak it with iodine.
 17. Apply the iodinated cotton ball between the labias in vulva of female patient from up to dawn or over the penile head in male patient 3 times.
 18. Each time discard the contaminated cotton balls in medical waste.
 19. With your dominant hand take the tip of the Foley catheter and soak it into the lubricant so that the 10 cm of the tip of the catheter will become lubricated.
 20. Insert the tip of the catheter into the urethra.
 21. Push the catheter until the urine comes to flow into the tubes.
 22. Pull the sterile water inside the syringe to inflate the balloon and stabilize the catheter inside the bladder.
 23. Gently pull back the catheter until the resistance is felt.
 24. Stabilize the catheter on the thigh of the patient.

