

LOCAL OPERATING PROCEDURE

CLINICAL POLICIES, PROCEDURES & GUIDELINES

Approved by Quality & Patient Care Committee
April 2016

CLIPS AND/OR SUTURES REMOVAL

This LOP is developed to guide clinical practice at the Royal Hospital for Women. Individual patient circumstances may mean that practice diverges from this LOP.

1. AIM

- To remove sutures using aseptic technique whilst preventing any unnecessary discomfort, trauma or risk of infection to the patient.
- To remove surgical sutures as ordered by the patient's Royal Hospital for Women's medical
 officer to promote and assist in optimum wound healing.

2. PATIENT

Any woman with sutures / staples insitu

3. STAFF

- · Medical, nursing and midwifery staff
- Enrolled Nurses
- Student Nurses under supervision are permitted to remove sutures.

4. EQUIPMENT

- Non-sterile gloves
- · Basic sterile single use dressing pack
- Sterile stitch cutter
- +/- steri-strips
- +/- 30mls sterile 0.9% normal saline for irrigation
- +/- Sterile combine
- +/- micropore tape
- Small bag for waste disposal

5. CLINICAL PRACTICE

- Complete pre-procedure requirements in accordance with Level 1 Procedures within NSW Ministry of Health PD2014 036- Clinical Procedure Safety including:
 - > Confirmation of patient identification
 - > Procedure verification confirmed with patient and matches treatment plan
- Wash Hands in accordance with SESLHD PR/343-Hand Hygiene and bare below the elbows
- Remove old dressing if it has not already been removed.
- Consider analgesia before removing clips and/or sutures and document
- Collect equipment
- · Ensure patient privacy
- Wash Hands in accordance with <u>SESLHD PR/343-Hand Hygiene and bare below the elbows</u>
 Set up dressing pack (refer to procedure for aseptic dressing technique)
 - Add stitch cutter or clip remover as well as normal saline, combine and/or steri-strips if required to sterile field
 - Adjust height of bed to promote safe manual handling for staff member attending to suture removal
 - Assist patient to lie on their back and adjust bed and pillows to promote patient comfort where appropriate
 - Expose clips and/or suture(s) and cover patient appropriately to maintain patient's dignity
 - Wash Hands in accordance with <u>SESLHD PR/343-Hand Hygiene and bare below the</u> elbows and don gloves



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Removing Sutures.

- Lift suture free of skin surface with forceps
- Cut suture on one end only as close as possible to patient's skin with blunt surface of stitch cutter against the patient's skin surface
- Do not allow exposed suture material to be drawn back beneath the skin surface. Hold the uncut suture with forceps and gently remove the entire suture.
- Dispose of suture
- Remove remaining sutures if appropriate

Removing Clips.

- Insert remover under clip by opening handles of remover
- Gently squeeze remover handles together to release the clip from the patient's skin. Dispose of clip appropriately.
- Remove alternate clips unless otherwise ordered by medical officer and document
- Assess wound union, if gapping in incision line is evident, notify medical officer before
 proceeding with further removal. If skin has healed proceed with clip removal as ordered
 and document
- Do not clean the incision line with normal saline if it is clean and dry (this increases the risk of infection)
- Swab the incision line if it has evident debris using normal saline soaked gauze, in one direction only. Use each piece of gauze once only, then discard. Allow skin to dry
- Apply steri-strips if required and document
- Do not cover incision line if dry and intact. If ooze is evident then apply combine and anchor with micropore tape if appropriate
- Lower bed and terminate patient encounter appropriately
- Dispose of equipment appropriately, making sure stitch cutter is disposed of in sharps container
- Remove gloves and Wash Hands in accordance with <u>SESLHD PR/343-Hand Hygiene</u> and bare below the elbows
- Complete Post-procedure requirements <u>in accordance with Level 1 Procedures within NSW Ministry of Health PD2014 036- Clinical Procedure Safety including:</u>
 - Documentation in the health care record
 - Post procedure instructions and advice for clinical handover

6. DOCUMENTATION

- Integrated clinical notes
- Operation report
- Wound chart
- Nursing care plan/critical pathway

7. EDUCATIONAL NOTES

8. RELATED POLICIES / PROCEDURES / CLINICAL PRACTICE LOP

- NSW Infection Control Policy:
- http://www.health.nsw.gov.au/policies/pd/2007/pdf/PD2007 036.pdf
- NSW Hand Hygiene Policy:
- http://www0.health.nsw.gov.au/policies/pd/2010/pdf/PD2010_058.pdf
- SESLHD Wound Assessment and Management October 2015
- Wound assessment and management
- SESLHD Managing pain at dressing change- November 2015
- Wound Management managing pain at dressing change



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9. RISK RATING

Low

10. NATIONAL STANDARD

• CC - Comprehensive Care

11. REFERENCES

Prince of Wales Removal of Sutures and Staples September 2015 Wound: Sutures and Staples, Removal of

Perry and Potter 2010 Clinical Nursing Skills and Techniques 7th Edition, Mosby, Elsevier.

REVISION & APPROVAL HISTORY

Reviewed and endorsed Gynaecology Services Patient Quality & Safety Committee 25/2/16 Replaced previously titled :

Removal of Clips and Staples and Removal of Sutures

Approved Quality Council 15/7/02

Endorsed by Gynaecological Oncology Clinical Committee 5/7/02; Maternity Services Clinical Committee 9/7/02 and Gynaecology Clinical Committee 12/7/02

FOR REVIEW: APRIL 2021