

Basic Wound Care Kit

Information for patients

While you are waiting for a nurse to assess your wound, Ontario Health atHome Erie St. Clair is providing you with supplies to help keep your wound clean, dry and protected.

Your kit contains the following:

- Normal saline cleansing solution;
- Sterile gauze, size 4 X 4; and
- Perforated tape (Medipore).

You will need to change your dressing at least once every day, but you may need to change it more often if the dressing gets too wet or if you notice blood or other fluids showing on the outside of the dressing. If you need to change your dressing more than twice a day or your wound is very large, you may need different supplies. Please call your Care Coordinator.



Seek URGENT (same day) medical attention from your family doctor or nurse practitioner, or go to the emergency department if you experience any of the following:

- A **FEVER** of 38°C or higher, or **CHILLS**
- Increased **DRAINAGE** or **PUS**
- Increased **REDNESS** to the skin around the wound
- Skin around the wound becomes **WARM** or **HOT TO THE TOUCH**
- Increased **SWELLING**
- Worsening **PAIN** in or around the wound
- A new or worsening **ODOUR**

Contact Information

If you have any questions regarding this service, please contact: **1-833-515-1234** • ontariohealthathome.ca

Step by step – how to change a wound dressing:

1. CLEAN hands

Wash hands with soap and water or use alcohol-based hand sanitizer.



2. REMOVE old dressing

Gently pull away the tape that is holding the dressing in place.



3. CLEAN the wound

- Remove the saline bottle cap.
- Hold the bottle of saline about one inch away from the wound.
- Spray the entire wound to remove any old drainage or debris.



4. DRY the wound

Pat the wound dry with the gauze.



5. COVER the wound

Place clean dry gauze over the entire wound.



6. SECURE the dressing

Place tape over top of the gauze to secure the dressing to the surrounding skin.



7. CLEAN hands

Wash hands with soap and water or use alcohol-based hand sanitizer.

