

Quick Reference Guide

Prevention of Wound Infection – Saving Dressing Pieces¹ When to Use & How to Save

Appropriate Use of Saved Dressing Pieces:

With sterile technique: **X**

With no-touch technique: **✓** may be either sterile or saved dressing pieces

With clean technique: **✓**

How to Save Dressing Pieces

- In preparation for the dressing change, open the sterile package and place the dressing material onto the sterile dressing tray.
- Use sterile forceps and sterile scissors to cut a piece of the dressing that fits into or covers the wound.
- Use sterile forceps to place the remaining dressing piece into a new C&S container or a new re-sealable plastic storage bag (e.g., Ziploc bag). Each dressing needs its own container/storage bag.
- Close/seal the container or bag correctly and label the container or bag with the client's name, the date and the name of the dressing. **Note:** Once a sterile C&S container seal is broken and open to the air, it is no longer considered sterile.

How to Use Saved Dressing Pieces

- In preparation for the dressing change, use sterile forceps to remove a dressing piece from the container or bag and place the dressing material onto the sterile dressing tray.
- Use sterile forceps and sterile scissors to cut a piece of the dressing that fits into or covers the wound.
- Use sterile forceps to place the remaining dressing piece back into the container or bag; label with the client's name, date and identify the name of the dressing.

Saved dressing(s) pieces are only kept for 2 weeks; after that time discard the container or bag and any remaining dressing pieces.

If saving another dressing piece, place it in a new C&S container or re-sealable plastic storage bag using the steps described above.

From the:

British Columbia Provincial Nursing Skin & Wound Committee

[Guideline: Assessment, Prevention & Treatment of Wound Infection](#)

¹ A literature review did not find any existing guidelines regarding how to appropriately save dressing pieces nor was literature found to refute this practice. An expert consensus process was used to develop this practice for British Columbia. These infection control strategies have been reviewed and approved by the British Columbia Provincial Infection Control Network Management Office.