 Department of Health Government of Nunavut		NURSING POLICY, PROCEDURE AND PROTOCOLS	
		Community Health Nursing	
TITLE:		SECTION:	POLICY NUMBER:
Topical Hemostatic Agents		Clinical Procedures	11-008-00
EFFECTIVE DATE:	REVIEW DUE:	REPLACES NUMBER:	NUMBER OF PAGES:
February 10, 2018	February 2021		3
APPLIES TO:			
Community Health Nurses			

POLICY:

Registered nurses, who receive additional instruction from the Nurse Educator / Delegate, may apply topical hemostatic agents to decrease bleeding. Only nurses who have received additional training may apply silver nitrate sticks without a physician's order; all other hemostatic agents require a physician's order.

Hemostasis agents shall not be applied to distal digits or skin appendages.

DEFINITIONS:

Topical Hemostatic Agents are chemical agents which may be applied to superficial wounds to decrease bleeding via rapid vasoconstriction of small area of tissue or when rapid hemostasis is essential.

PRINCIPLES:

- Hemostasis agents should not be used in injuries that involve the distal digits or on skin appendages because it may produce ischemia.

RELATED POLICIES, GUIDELINES AND LEGISLATION:

Procedure 11-008-01 Application of Hemostatic Agents

REFERENCES:

Edmunds, M. & Mayhew, M. (2003). *Procedures for Primary Care Practitioners, 2nd ed.*. St. Louis: Mosby.



PROCEDURE 11-008-01

NURSING CONSIDERATIONS:

1. Hemostasis agents should be used with caution in clients with a history of poor healing.
2. Hemostasis agents should not be used in clients who have had hypopigmentation or hyperpigmentation skin reactions.

COMMON TOPICAL HEMOSTATIC AGENTS			
AGENT	CHARACTERISTICS	USES	LIMITATIONS
Epinephrine	Extremely potent; vasoconstriction	Apply topically with cotton applicators (may also be injected intradermally or subcutaneously)	Must be used in only small amounts or tissue necrosis and sloughing may develop Cannot be used on digits or with skin appendages
Ferric Subsulfate	Produces rapid hemolysis	Especially useful with seborrheic keratoses or basal cell carcinoma	Frequently causes pigment changes and staining of the skin
Silver Nitrate Sticks	Fast hemolysis; Relatively inexpensive	Silver nitrate is impregnated in the cotton-tipped applicator	Most likely to cause pigment changes and staining of the skin Silver nitrate sticks must be kept dry or they deteriorate.

Adapted from: Edmunds, M. & Mayhew, M. (2003). *Procedures for Primary Care Practitioners, 2nd ed.*. St. Louis: Mosby.

EQUIPMENT
<ul style="list-style-type: none">✓ Non sterile gloves✓ Sterile fenestrated drape✓ Sterile cotton-tipped applicators✓ Sterile 4X4 gauze pads✓ Topical hemostatic agents

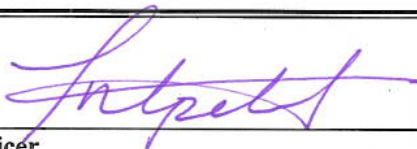



PROCEDURE:

1. Position client comfortably with the area well illuminated with light.
2. Clean the area if this has not already been done.
3. Drape area with sterile fenestrated drapes.
4. Either remove two silver nitrate sticks from the sealed container for use or dip a cotton-tipped applicator into the hemostatic solution. Then squeeze the cotton applicator against the side of the container top to ensure that extra solution runs back into the bottle so it will not drip or run when applied to the skin.
5. Using two fingers stretch the skin tight over the area where hemostasis is required.
6. Wipe off any excess blood from the skin with sterile gauze and immediately apply the chemically filled cotton-tipped applicator to the area for at least 15 seconds.
7. Discard the cotton-tipped applicator and then release tension on the skin.
8. The procedure may need to be repeated more than once until successful hemolysis is achieved.
9. If the base of a lesion is being cauterized with this chemical method, make certain that the chemical is applied to the whole base of the lesion.

CLIENT EDUCATION:

- Skin will appear red and inflamed for up to 48 hours from the chemical irritation.
- Pain is usually mild. Client may take acetaminophen every 4 hours as needed to reduce pain.
- Instruct client to return to the health centre for evaluation if bleeding or any signs of infection (swelling, warmth of tissues, drainage, and foul-smelling odour) develop.

Approved by:		Effective Date:
Chief Nursing Officer	11 FEB 2011 Date	April 1, 2011
		
Deputy Minister of Health and Social Services	February 11, 2011 Date	

