# Care of Fingernails/Toenails

<table>
<thead>
<tr>
<th>Purpose</th>
<th>The purposes of this procedure are to clean the nail bed, to keep nails trimmed, and to prevent infections.</th>
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| Preparation | 1. Review the resident’s care plan to assess for any special needs of the resident.  
2. Assemble the equipment and supplies as needed |
| General Guidelines | 1. Nail care includes daily cleaning and regular trimming.  
2. Proper nail care can aid in the prevention of skin problems around the nail bed.  
3. Unless otherwise permitted, **do not trim the nails of diabetic residents or residents with circulatory impairments**.  
4. Trimmed and smooth nails prevent the resident from accidentally scratching and injuring his or her skin.  
5. Watch for and report any changes in the color of the skin around the nail bed, blueness of the nails, any signs of poor circulation, cracking of the skin between the toes, any swelling, bleeding, etc.  
6. Stop and report to the nurse supervisor if there is evidence of ingrown nails, infections, pain, or if nails are too hard or too thick to cut with ease. |
| Equipment and Supplies | The following equipment and supplies will be necessary when performing this procedure.  
1. Nail clippers;  
2. Nail file or emery board;  
3. Towel;  
4. Rinse basin with clear, warm water;  
5. Wash basin one-half full of warm soapy water;  
6. Orange sticks;  
7. Linen protector (disposable or plastic), as necessary;  
8. Hand lotion (as permitted or prescribed);  
9. Paper towels; and  
10. Personal protective equipment (e.g., gowns, gloves, mask, etc., as needed). |
| Steps in the Procedure | 1. Place the equipment on the bedside stand or overbed table. Arrange the supplies so they can be easily reached.  
2. Wash and dry your hands thoroughly.  
3. Fill the wash basin one-half full of warm soapy water.  
4. Allow the first hand or foot to soak in the warm soapy water for approximately five (5) minutes. Encourage the resident to exercise his or her fingers or toes while they are soaking.  
5. If the wash basin is to be placed on the bed, place the linen protector under the wash basin to protect the linen and to keep the resident dry.  
6. Rinse the hand or foot that has been in the soapy water with clear, warm water.  
7. Dry the hand or foot with the towel.  
8. Place the towel under the resident’s dried hand or foot. |

*continues on next page*
Steps in the Procedure (continued)

9. Place the second hand or foot in the soak basin.
10. Gently, remove the dirt from around and under each nail with an orange stick.
11. Wipe the dirt from the orange stick with a paper towel. Discard the paper towel into the trash receptacle.
12. Do not trim nails below the skin line or cut the skin.
13. Trim fingernails in an oval shape and toenails straight across.
14. Smooth the nails with a nail file or emery board. Apply lotion as permitted.
15. Repeat the procedure for the second hand or foot.
16. If the resident becomes tired, weak, or faint during the procedure, cease the procedure and summon the nurse supervisor by using the call system.
17. When the nails on both hands or feet have been trimmed, remove the wash basin. Empty the water into the commode. Flush the commode.
18. Discard disposable equipment and supplies in designated containers.
19. Remove the towel and discard into the soiled laundry container.
20. Clean reusable equipment and supplies and return to designated storage areas.
21. Clean the overbed table and return it to its proper position.
22. Lower the bed into lowest position and place the siderails and the head of the bed in the appropriate position as indicated in the resident’s plan of care.
23. Reposition the bed covers. Make the resident comfortable.
24. Place the call light within easy reach of the resident.
25. Wash and dry your hands thoroughly.

Documentation

The following information should be recorded in the resident’s medical record as necessary.

1. The date and time that nail care was given.
2. The name and title of the individual(s) who administered the nail care.
3. The condition of the resident’s nails and nail bed, including:
   a. Redness or irritation of skin of hands and feet;
   b. Breaks or cracks in skin, especially between toes;
   c. Pale, bluish, or gray discoloration of feet;
   d. Bluish or dark color of nail beds;
   e. Corns or calluses;
   f. Ingrown nails;
   g. Bleeding; and/or
   h. Pain.
4. Any difficulties in cutting the resident’s nails.
5. Any problems or complaints made by the resident with his/her hands or feet or any complaints related to the procedure.
6. If the resident refused the treatment, the reason(s) why and the intervention taken.
7. The signature and title of the person recording the data.
Reporting

1. Notify the supervisor if the resident refuses the care.
2. Report other information in accordance with facility policy and professional standards of practice.

References

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<tr>
<th>MDS (RAPs)</th>
<th>G1j(A)(B); (RAP #5a)</th>
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<tbody>
<tr>
<td>Survey Tag Numbers</td>
<td>F310; F312</td>
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<tr>
<td>Related Documents</td>
<td></td>
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<tr>
<td>Risk of Exposure</td>
<td>Blood–Body Fluids–Infectious Diseases</td>
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<tr>
<td>Procedure Revised</td>
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