Hot Eye Compress

Purpose

The purposes of this procedure are to improve circulation, reduce inflammation and promote comfort.

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. If both eyes require compresses, wash and dry your hands thoroughly before treating each eye.
2. If discharge is present, or should both eyes require treatment, use a new compress for each application.
3. Hot compress solution should not exceed 110°F (43.3°C), unless otherwise ordered.

Equipment and Supplies

The following equipment and supplies will be necessary when performing this procedure.

1. Lubricant;
2. Solution (as prescribed);
3. Gauze eye compresses;
4. Emesis basin;
5. Cotton balls;
6. Thumb forceps (2);
7. Sterile container; and
8. 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. Put on gloves.
4. If the resident is sitting up, turn his/her head slightly toward the affected side.
5. If the resident is bedfast, position the resident’s head on the pillow and turn the head slightly toward the affected side.
6. Apply the lubricant to area in which the compress is to be applied.
7. Pour heated solution in sterile container.
8. Place the eye compress into the sterile container. Allow the compress to soak.
9. Using the thumb forceps, wring the eye compress as dry as possible.
10. Place the compress on the eye.
11. If pain is experienced, cease the procedure and summon the nurse supervisor.
12. Change the compress when the heat is lost. (Note: Unless otherwise ordered, continue the treatment for five (5) minutes.)
13. Discard used eye compresses into designated container.
14. When the last compress has been used, dry the eye from the nose to the outside of the eye with cotton balls. (Note: Use only one (1) cotton ball per wipe.)
15. Discard used cotton balls into designated container.
16. Apply clean or sterile eye dressing as ordered.
17. Remove gloves and discard into designated container. Wash and dry your hands thoroughly.
18. Clean your equipment and return it to its designated storage area (i.e., bedside stand, bathroom, etc.).

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Steps in the Procedure (continued)

19. Discard disposable equipment and supplies in designated containers.
20. Clean the overbed table and return it to its proper position.
21. 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**.
22. Reposition the bed covers. Make the resident comfortable.
23. Place the call light within easy reach of the resident.
24. Wash and dry your hands thoroughly.

Documentation

The following information should be recorded in the resident’s medical record:

1. The date and time the cold compress was applied.
2. The name and title of the individual(s) who applied the cold compress.
3. The type of solution used to treat the eye.
4. All assessment data obtained concerning the resident’s eye.
5. How the resident tolerated 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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