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**Review Article**

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**WOUND DRESSING ROOM AND ALGORITHM FOR PERFORMING BANDAGING  
OPERATIONS IN IT**

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**Annotation.**

This scientific article extensively analyzes the concept of a wound dressing room and the algorithm for performing dressing procedures in it. The research also explains 5 steps that are considered important for performing dressing procedures.

**Keywords:** sanitary standards, purulent wounds, dressing room nurse's clothing, disinfectant.

In medicine, today, each surgical department should be well-equipped, meet the requirements of asepsis and current sanitary standards. The dressing room is a room intended for dressing procedures, and is specially allocated for "clean" and "purulent" dressing procedures. Sometimes the dressing room can be used for diagnostic purposes. The square area of the dressing room should be 15 square meters - this is for one dressing table, and 30 square meters if there are two. The dressing room should be fully equipped with the necessary equipment, devices and instruments. If there is only one dressing room, the treatment of purulent wounds is carried out after the treatment of clean wounds, then the rooms and all equipment are thoroughly treated with disinfectant solutions. The sequence of dressings is planned taking into account the cleanliness of the wounds. When performing dressing work, dressings should be individual for each person. The composition of dressing sets is determined depending

on the simplicity or complexity of the type of dressing. Each department equips the set based on its own work methods. If there is no individual set for each patient, the dressing table is spread out once a day for 6 hours. In this case, a sterile bag with dressing materials should be kept in reserve for emergencies.

Before starting work, the surfaces of all equipment in the room are wiped with a disinfectant. After making sure that the room is ready for work, work begins. The ward nurse should wear a simple gown, white pants, a hat, slippers (with closed toes), and a mask, without unnecessary decorations, jewelry, nails should be cut off, and not painted with varnish. The ward nurse is directly assisted by a junior medical worker in organizing work. After putting on the mask, the nurse performs hygienic treatment of hands with liquid soap. It should be noted that if hands are washed hygienically once, the number of transient microbes on the hands decreases by 40%, and when washed again, by 70%. The clamps are fastened to both tables, the date and time are written on the labels, and the temperature indicator is recorded in the appropriate notebook. Work begins.

**The procedure for performing a bandage consists of 5 steps:**

1. Removing the bandage. There is also a special method for removing the bandage. We remove the bandage with circular movements, avoiding the wound. If it is wet (soaked) or contaminated with a large amount of blood, in this case we cut it off with Richter scissors, and when removing adhesive bandages, we soak the ends in alcohol to avoid irritating the skin.

2-Cleaning the wound area. The wound area is gently wiped with alcohol. Any fabric threads and blood residues stuck to the wound are removed. The tampon, drains, rubber tubes in the wound are removed, and dead tissue around the wound is removed with scissors.

3-Medical procedures. First, the wound is washed with antiseptics. Drying. Hypertonic solutions, the use of furatsilin or antibiotics, regenerating drugs, ointments, in general, local medical procedures are performed depending on the condition of the wound.

4-Applying an aseptic dressing. When applying an aseptic dressing (sterile napkin), it is necessary to take into account the location of the wound, its size or spread.

5-Fixing the bandage. The nurse fixes the dressing with a plaster or bandage. Bandages are wound in a spiral shape, overlapping each other, without tightening. Adhesive bandages are tightened without tightening, avoiding hairy areas of the skin.

After each dressing, the dressing table is wiped with a disinfectant, and gloves are changed. One thing should be noted here. There is a time interval between successive dressings, which depends on the chlorine activity of the disinfectant we use and the sensitivity of microorganisms to it. The higher the chlorine activity, the shorter the interval time, and vice versa.

Reusable medical devices are disinfected after each use (according to the instructions for each disinfectant) by immersing them in a chlorine-containing solution for 10 minutes. Then, reusable medical devices are transferred to centralized sterilization departments for sterilization. Waste is sorted into classes and disposed of in accordance with current sanitary rules and regulations. The room is subjected to final cleaning and disinfected with a bactericidal lamp for 30 minutes.

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