## PURPOSE:
To remove a foreign material which can cause an abscess or physically impair the area of the foreign body location.

### POLICY AND GENERAL INSTRUCTIONS:
Performed by physician using sterile or clean techniques.

### PERSONNEL:
(Trained nursing personnel)

### EQUIPMENT:
- X-ray, if the foreign body is radiopaque
- Excision tray
- Skin hooks
- #15 knife blade
- 12 cc syringe
- 25 gauge 5/8” needle
- 22 gauge 1-1/2” needle
- Local anesthetic (usually with epinephrine)
- Sterile gloves
- Neosporin ointment
- H2o2

### PROCEDURE:

1. Have operative permit signed

2. Position patient on table

3. Obtain the x-rays; place on view box.

4. Set up for the procedure

5. Assist the physician with the procedure.

6. Following the procedure, clean the wound and apply dressing if applicable.

7. Assist patient with getting dressed.
# Removal of Foreign Body

## I. Text

A. Wear short sleeved scrub top, cap covering hair completely and mask covering nose and mouth. Protective eye wear must be worn.

B. Open package of gloves.

C. Open tray - towel for drying hands is on top.

D. Wash hand and arms well with germicidal soap, cleaning nails.

E. Dry hands first, then arms. (See surgical Scrub Technique”).

F. Apply gloves. (See “Sterile Glove and Gloving Technique”)

G. Prepare instrument tray for the procedure by placing the instruments in the position to use. Instruments are left unlocked when sterilized; close them for procedure.

H. Accept the special instruments, suture, blade, local anesthesia, etc

I. Place blade on scalpel handle

J. Draw local anesthetic to 10 ml marking on syringe.

K. Place sponge on sponge forceps for prepping the patient.

L. Place the first suture used on the needle holder

M. Assist physician with the procedure, as requested.

N. Following procedure

1. Clean the incision, apply disinfectant solution or ointment as prescribed by physician. Apply dressing

2. Clean the surrounding area as necessary. DO NOT RETURN TO INCISION.

3. Either the person setting up or the person circulating may instruct the patient in the care of the wound, or if the physician has explained, check for assurance that the patient understands.

4. Have the patient sit for a few minutes before walking; usually 1-2 minutes is long enough.

5. Scrub nurse will clean the instruments, dispose of needles and scalpel blade, soiled sponges, etc. This is done before the gloves are removed.

**NOTE:** See “Care of Instruments” for clean and contaminated cases.