Surgical technique
A simple drain dressing

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A drain dressing should be inexpensive, be easy to apply and remove, ensure the security of the drain and maximize patient comfort. These goals are achievable, but often drain security is prioritized at the expense of patient comfort and practicality.

We have found an effective method for dressing sutured drains with the use of a single “All-In-One” dressing or a 20 × 10-cm adhesive-absorbent pad (Primi-pore; Smith & Nephew, St. Laurent, Que.); other comparable dressings work equally well (e.g., Medpore; Mölnlycke Health Care, Göteborg, Sweden). After the drain has been sutured in place, the dressing is cut along its short axis into 2 equal halves. Next, with one of the halves, a Y-pattern incision is made through the absorbent pad (Fig. 1, top). This half of the dressing is then applied with the drain carefully inserted into the Y-pattern such that it lies along the top of the dressing (Fig. 1, middle). This step minimizes the potential for local skin irritation due to frictional contact between the drain tube and adjacent skin. The second half of the dressing is placed over top with the cut edge positioned on top of the drain, concealing and further securing the drain site (Fig. 1, bottom). This dressing may be applied directly over Steri-Strips (3M Health Care, St. Paul, Minn.), which will remain undisturbed upon removal of the drain dressing.

The “All-In-One” dressing, a combination of absorbent and adhesive material, is simple and easy to apply and remove. In addition, the surface of the dressing is soft and made of hypoallergenic adhesive. Material needed for this technique is inexpensive: a single dressing individually packaged costing Can$0.58. This cost is comparable to 3 pieces of split gauze. The dressing reduces the risk of local skin irritation. With the placement of the first 10 × 10-cm portion, the dressing circumferentially covers the adjacent skin thereby preventing drain tubing–skin contact proximally. Lastly, the dressing is aesthetically pleasing and conceals the drain site, which may alleviate psychologic concerns for a specific population of patients.

The main author (R.M.) has used this drain dressing in more than 250 patients over the last 5 years. The patients report that the dressing is comfortable and easy to remove. Suturing the drain before applying the dressing is preferred for additional security but may not be necessary. The nurses have been similarly pleased with the low maintenance aspect of this dressing.

As described, an “All-In-One” adhesive-absorbent pad is a simple, inexpensive, secure and effective method of dressing drains.

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