

The reduction of risk to staff during the COVID-19 pandemic is essential. Public Health England guidance outlines the personal protective equipment (PPE) requirements during operative procedures.¹ Understandably, exposure through aerosol secondary to power-tools remains a concern. The need to adapt orthopaedic trauma techniques to mitigate risk is clear.

We describe a safe, low cost and effective technique for reducing aerosol spread during the unavoidable aerosol generation from triple reaming and drilling during a sliding hip screw for a hip fracture.

A hole is cut eccentrically in a kidney dish and the triple reamer is assembled each side of the dish (Fig 1a and 1b). The kidney dish is placed over the incision creating an effective seal. Reaming can be performed in the usual fashion (Fig 2a and 2b).

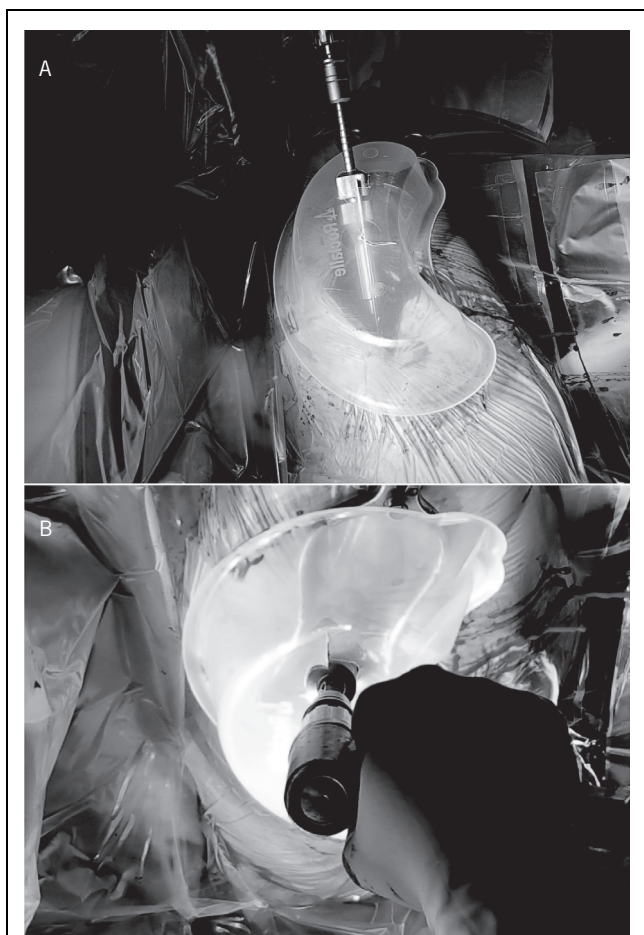


Figure 2 By creating an effective seal, reaming can be performed in the usual fashion (a and b)

While adherence to full PPE in line with guidance is mandatory, this technique is an adjunct. Surgeons could apply this technique to multiple trauma situations where power tools are necessitated.

Reference

1. Guidance on supply and use of personal protective equipment (PPE). NHS England. <https://www.england.nhs.uk/coronavirus/publication/guidance-supply-use-of-ppe/> (cited April 2020).

Hydrocolloid dressing strip over bridge of nose to relieve pain and pressure from Filtered Face Piece (FFP) masks during the coronavirus (COVID-19) pandemic

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BACKGROUND

Prolonged pressure from Filtered Face Piece (FFP) masks during the current coronavirus (COVID-19) pandemic has caused some healthcare professionals to develop pressure areas or device-related pressure ulcers (DRPU).¹ Images of such injuries (Fig 1) have



Figure 1 Effect of FFP mask, no DuoDERM®

drawn attention from both social and mainstream media.² When the first author encountered FFP mask discomfort during a hip fracture case, help was sought from tissue viability colleagues. We describe a simple, effective and low-cost method of protecting the particularly vulnerable bridge of nose.



Figure 2, DuoDERM®, Cavilon™ and scissors from TVN



Figure 4 Effect of FFP mask with DuoDERM®



Figure 3 DuoDERM® applied



Figure 5 FFP mask fit test

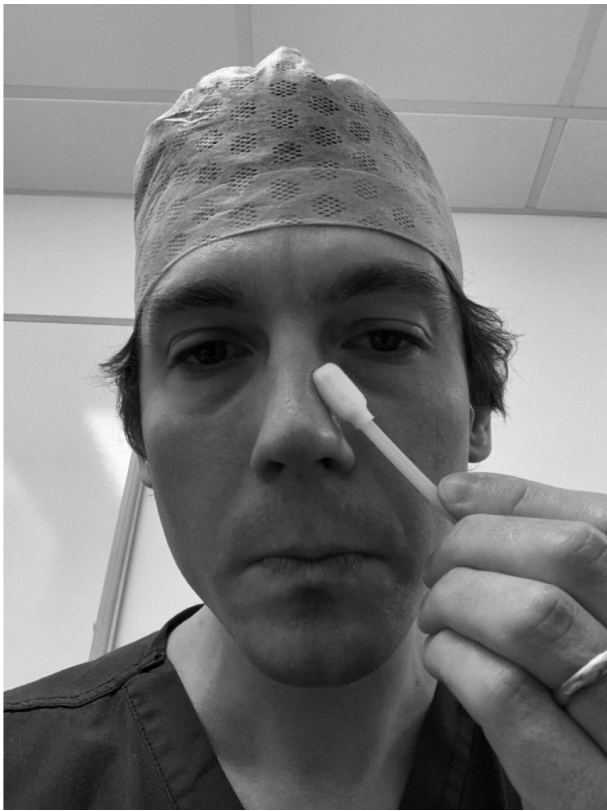


Figure 6 Cavilon™ application

TECHNIQUE

A self-adhesive hydrocolloid dressing, in this case, DuoDERM® EXTRA THIN (Reading, RG1 3JH, UK), is cut into a thin strip (Fig 2). Use of the curved edges of the dressing is made to follow the contour of the nasal bridge and minimise waste (Fig 3). The strip is positioned directly beneath the mask on the bridge of the nose and can provide both pain and pressure relief for an entire shift (Fig 4). A repeat fit test (Fig 5) with hydrocolloid dressing strip in situ beneath the FFP mask does not appear to compromise the seal.

DISCUSSION

Healthcare professionals, including surgeons, whether redeployed to intensive care units or operating with FFP masks, may find this a useful means of avoiding nasal bridge pressure areas. Where available, a no sting barrier film, such as Cavilon™, may first be applied to the bridge of nose for additional comfort (Fig 6).

None of the authors have a commercial interest in either product.

References

1. Gefen A, Alves P, Ciprandi G *et al.* Device related pressure ulcers: SECURE prevention. *J Wound Care* 2020; **29(Suppl 2a)**: S1–S52.
2. Mills J. Medics left with sore marks all over their skin from coronavirus face masks. *Metro*. 5 February 2020. <https://metro.co.uk/2020/02/05/medics-left-sore-marks-skin-coronavirus-face-masks-12188952/> (cited April 2020).