

*Procedure Checklists for Craven and Hirnle's Fundamentals  
of Nursing: Human Health and Function, 6th edition*

Name \_\_\_\_\_ Date \_\_\_\_\_

Unit \_\_\_\_\_ Position \_\_\_\_\_

Instructor/Evaluator: \_\_\_\_\_ Position \_\_\_\_\_

			<b>Applying a Pneumatic Compression Device</b>	
<b>Excellent</b>	<b>Satisfactory</b>	<b>Needs Practice</b>	<p><b>Goal:</b> To promote venous return from legs to decrease the risk of deep vein thrombosis and pulmonary embolism in clients with reduced mobility.</p>	<b>Comments</b>
_____	_____	_____	1. Measure leg to ensure proper sleeve sizing. <i>Note:</i> Knee length—one size fits all; thigh length—measure length of leg from ankle to popliteal fossa. Measure circumference of thigh at the gluteal fold. Use the correct sleeve size, as follows: extra small (circumference, 22 inches; length, 16 inches); regular (circumference, 29 inches; length, 16 inches); extra large (circumference, 35 inches; length, 16 inches).	
_____	_____	_____	2. Apply antiembolism stockings. Ensure that there are no wrinkles or folds. <i>Note:</i> Stockinette or Ace wraps are recommended options if client cannot be fitted with antiembolism stockings.	
_____	_____	_____	3. Place client in supine position.	
_____	_____	_____	4. Place a plastic sleeve under each leg so that the opening is at the knee. If only one sleeve is required, leave the other sleeve in package and connect to control unit.	
_____	_____	_____	5. Fold the outer section of the sleeve over the inner portion and secure with Velcro tabs. Check sleeve fit. Two fingers should fit between the sleeve and leg.	
_____	_____	_____	6. Connect tubing to control unit. The premarked arrows on the tubing from the sleeve and from the controller must be aligned to make adequate connection. Turn machine on.	
_____	_____	_____	7. Adjust control unit settings as necessary. Unit control is preset with sleeve cooling in “off” position and audible alarm in “on” position. Sleeve cooling should be in “on” position at all times except during surgery. Ankle pressure should be set at 35–55 mm Hg.	
_____	_____	_____	8. Recheck control unit settings whenever unit has been turned off.	
_____	_____	_____	9. Respond to and promptly correct all “fault” indicator alarms. <i>Note:</i> The control unit will sense and indicate four pressure “fault” conditions: (a) pressure failed to drop to zero during the cycle; (b) the ankle pressure failed to reach 20 mm Hg	

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			<div>Goal: To promote venous return from legs to decrease the risk of deep vein thrombosis and pulmonary embolism in clients with reduced mobility.</div>	Comments
<div>_____</div>	<div>_____</div>	<div>_____</div>	<div>for five consecutive cycles; (c) the ankle pressure exceeded 90 mm Hg; (d) internal diagnostics error has occurred.</div> <div>10. Document time and date of application. If SCD is applied to only one leg, document reason.</div> <div>11. Assess and document skin integrity every 8 hours.</div> <div>12. Remove sleeves and notify physician if client experiences tingling, numbness, or leg pain.</div>	