



Lippincott Procedures

임상간호술기 데이터베이스

- 모바일 앱 사용법(Mobile App Guide)

[https://ymlib.yonsei.ac.kr/wp-content/uploads/2021/05/202105\\_Lippincott\\_mobile.pdf](https://ymlib.yonsei.ac.kr/wp-content/uploads/2021/05/202105_Lippincott_mobile.pdf)

- 사용법 동영상(User Guide Video)

<https://kvgo.com/lippincott-solutions/LPintro>



Wolters Kluwer

# Lippincott Procedures 소개

- 가장 최신 정보를 제공하며 분기별 자료 업데이트
- 교과서가 아닌 임상 정보로 Peer-to-peer 의 간호 관련 언어 사용
- 증거 기반의 실습 중심으로 이루어진 간호 절차 정보
- 환자의 접점에서 이용되는 간호 전문 자료 (술기 정보 및 비디오 자료)



## Lippincott Procedures

**Lippincott Procedures** is your web-based, go-to source for step-by-step, point-of-care procedural guidance to help your clinicians save time and provide safer, more effective care.

Learn more about Lippincott Procedures



# Lippincott Procedures 접속

## Lippincott Procedures

### Login

Username or Email Address:

Password:

Login

[Forgot Username or Password?](#)

### Alternate Login Options

Active Directory

OpenAthens

### Support

If your institution currently is a subscriber to **Lippincott Procedures** and you are having difficulty accessing it, **please contact our technical support help desk at:**

**1-844-303-4860 (international 301-223-2454)** or [LNS-Support@wolterskluwer.com](mailto:LNS-Support@wolterskluwer.com).

Hours available: Monday through Thursday, 8 AM to Midnight EST; Friday 8 AM to 7 PM EST and Sunday, 4 PM to Midnight EST.

Emergency after-hours Technical Support is available by calling 1-877-247-6843.

### Learn more about Lippincott Procedures


For more information on how **Lippincott Procedures** can help nurses at your institution, please visit our [website](#) or contact us at: [Sales@LippincottSolutions.com](mailto:Sales@LippincottSolutions.com) or 1-855-695-5070.

이용자들은 IP로 접속되어 개인 ID나 PW 없이 바로 접속

어디에서든 접속이 가능함


# Lippincott Procedures – 메인 화면

**Select a Discipline** (drag and drop to reorder)

**Rapid Onboarding**  



The essential procedures to support rapid onboarding in response to the Coronavirus (COVID-19) pandemic.

Set as default: ☐

**Nursing**  


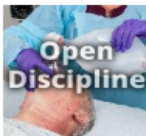
The Nursing discipline provides real-time access to step-by-step nursing procedures and skills in a variety of specialty settings.

Set as default: ☐

**Physical Therapy**  


The Physical Therapy discipline provides real-time access to step-by-step physical therapy procedures and skills.

Set as default: ☐

**Respiratory Therapy**  


The Respiratory Therapy discipline provides real-time access to step-by-step respiratory therapy procedures and skills.

Set as default: ☐

Search Query

All Procedures and Advisor Content



Admin Tools

My Account

Lippincott  
Advisor

Ovid

UpToDate



★ Favorites

Nursing	# A B C D E F G H I J K L M N O P Q R S T U V W X Y Z
All Nursing	
Advanced Practice	12-lead electrocardiogram (ECG)
Ambulatory Care	12-lead electrocardiogram (ECG) interpretation (Advanced practice)
Behavioral Health	12-lead electrocardiogram (ECG), ambulatory care
Critical Care	12-lead electrocardiogram (ECG), pediatric
Emergency	15-lead electrocardiogram (ECG)
Home Care	18-lead electrocardiogram (ECG)
Long-Term Care	2-hour timed urine specimen collection, pediatric
Maternal-Neonatal	24-hour timed urine specimen collection using a pediatric urine collection bag, pediatric female
Medical-Surgical	24-hour timed urine specimen collection using a pediatric urine collection bag, pediatric male
Neonatal Critical Care	24-hour timed urine specimen collection, pediatric
Oncology	Abdominal binder application
Pediatric	Abdominal girth measurement
Pediatric Critical Care	Abdominal girth measurement, neonatal
Perioperative	Abduction response, pediatric
	Accidental exposure to blood or body fluids, OR
	Active hallucinations patient care
	Acute dystonic reaction assessment and care

# 검색과 결과

## Procedures

All Procedures and Advisor Content

- Traumatic abrasion wound care, ambulatory care
- Traumatic abrasion wound care, AU
- Traumatic amputation wound care, AU
- Traumatic bite wound care, ambulatory care
- Traumatic laceration wound care, AU
- Traumatic puncture wound care, ambulatory care
- Traumatic puncture wound care, AU

Emergency

Home Care



12-lead electrocardiogram (ECG)

Search Query All Procedures and Advisor Content

<< Browse All Documents | ★ Favorites

Traumatic abrasion wound care, ambulatory care

Procedure

Skills Checklists

Quick Lists

- ☒ Introduction
- ☒ Equipment
- ☒ Preparation of Equipment
- ☒ Implementation
- ☒ Special Considerations
- ☒ Patient Teaching
- ☒ Complications
- ☒ Documentation
- ☒ Related Procedures
- ☒ Related Patient Teaching
- Handouts
- ☒ References
- ☒ Additional References

(View and Print Selected)

### Traumatic abrasion wound care, ambulatory care

Revised: February 21, 2020

#### ■ Introduction

In a traumatic abrasion, contact with a hard object, such as the road, floor, or carpet, scrapes the skin and results in loss of the epidermis and partial loss of the dermis of the skin. These partial-thickness wounds are typically shallow, red, painful, and highly exudative and may contain debris from the abrasion-producing event.<sup>[1]</sup> Occasionally, abrasions are full-thickness, involving the complete epidermis and dermis; these wounds may require debridement and skin grafting or flap coverage.<sup>[2]</sup> Abrasions can occur on any part of the body, but they usually affect bony areas, such as the hands, forearms, elbows, knees, and chin. They're typically more painful than lacerations because they involve a larger area of skin and expose more nerve endings. If they involve the head or neck, they may appear worse than they are because of the increased blood supply in these areas.<sup>[2]</sup> A patient doesn't typically seek medical treatment for an isolated traumatic abrasion. In most cases, they're associated with other traumatic injuries.

The first priority when caring for a patient with a traumatic wound is to assess circulation, airway, and breathing.<sup>[2]</sup> If circulation, airway, or breathing is compromised, the priority interventions are to initiate emergency treatment and arrange for transfer to an acute care setting. If the patient's condition is

Wolters Kluwer

All Procedures and Advisor Content

[Admin Tools](#)[My Account](#)[Lippincott  
Advisor](#)[Ovid](#)[UpToDate](#)

## ★ Favorites

## Nursing

[All Nursing](#)[Advanced Practice](#)[Ambulatory Care](#)[Behavioral Health](#)[Critical Care](#)[Behavioral Health Care](#)

## Cardiovascular Care

[Drug Administration](#)[Eye, Ear, and Nose Care](#)[Fundamental Procedures](#)[Gastrointestinal Care](#)[Geriatric Care](#)[Infection Control](#)[Intravascular Therapy](#)[Neurologic Care](#)[Orthopedic Care](#)

# A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

[12-lead electrocardiogram \(ECG\)](#)[12-lead electrocardiogram \(ECG\) interpretation \(Advanced practice\)](#)[12-lead electrocardiogram \(ECG\), pediatric](#)[15-lead electrocardiogram \(ECG\)](#)[18-lead electrocardiogram \(ECG\)](#)[Aquapheresis](#)[Arterial and venous sheath removal, pediatric](#)[Arterial catheter insertion \(Advanced practice\)](#)[Arterial line blood gas sampling, pediatric](#)[Arterial pressure closed monitoring system blood sampling, pediatric](#)[Arterial pressure monitoring, pediatric](#)[Arterial pressure open monitoring system blood sampling](#)[Arterial pressure open monitoring system blood sampling, pediatric](#)[Atrial electrogram](#)[Atrial electrogram, pediatric](#)[Atrial overdrive pacing](#)[Atrial overdrive pacing, pediatric](#)



- ☒ Introduction
- ☒ Equipment
- ☒ Implementation
- ☒ Special Considerations
- ☒ Patient Teaching
- ☒ Complications
- ☒ Documentation
- ☒ References
- ☒ Additional References

(View and Print Selected)

## Arterial catheter removal, AU

### ■ Introduction

Arterial catheters provide direct arterial pressure monitoring. Such monitoring permits continuous measurement of systolic, diastolic, and mean arterial pressures and allows arterial blood sampling. Because direct measurement reflects systemic vascular resistance as well as blood flow, it's generally more accurate than indirect, non-invasive blood pressure measurement methods (such as palpation and auscultation), which reflect blood flow only.

Direct monitoring is indicated when the patient's condition requires highly accurate or frequent blood pressure measurement—for example, in patients with low cardiac output and high systemic vascular resistance. It's used for patients who are receiving titrated doses of vasoactive drugs and can be useful for those who require frequent blood sampling. It's also useful for hospitalised patients who are obese or have severe oedema—conditions that can make indirect measurement hard to perform.

Arterial catheter removal should occur as soon as possible to decrease the risk of complications, such as thrombosis and infection.<sup>[1]</sup> Guidelines advise avoiding routine removal and replacement.<sup>[2]</sup> Some facilities don't permit nurses to remove arterial catheters, so nurses should ensure that they are permitted to perform this procedure before doing so.

### ■ Equipment

- Gloves
- Sterile 10 cm × 10 cm gauze pads

# 추가 정보

Eardrop instillation

Procedure Skills Checklists ☒ Quick Lists Images Videos

**스킬 체크리스트**

**Eardrop instillation**

**Objective: To administer eardrops in a safe manner according to the standard of care.**

- ❑ Avoid distractions and interruptions when preparing and administering the medication.
- ❑ Verify the practitioner's order.
- ❑ Gather and prepare the medication and the equipment.
- ❑ Compare the medication label to the order in the patient's medical record.
- ❑ Check the patient's medical record for an allergy or a contraindication to the prescribed medication. If an allergy or contraindication is present, don't administer the medication; instead, notify the practitioner.


Eardrop instillation, AU

Procedure Skills Checklists ☒ Quick Lists **Images** Videos

**이미지**

**Straightening the ...**

Straightening the ear canal in an adult



Eardrop instillation

Procedure Skills Checklists ☒ Quick Lists Images **Videos**

**비디오**


**Positioning the pa...**

Straightening the ...

Instilling the ear...

Positioning the patient

**Play Now**



# 술기 체크리스트와 Quicklist

The image shows a side-by-side comparison of the 'Eardrop instillation' procedure. On the left is the full procedure document, and on the right is a 'Quicklist' version of the same procedure, which is highlighted with a red border. A red arrow points from the 'Quick Lists' tab in the top navigation bar of the left document to the 'Quick Lists' tab in the right document.

**Left Document (Full Procedure):**

- Procedure** Skills Checklists Quick Lists Images Videos
- Eardrop instillation**
- Revised: A 12, 2016
- Introduction**

Eardrops treat infection and inflammation, soften cerumen for later removal, produce local anesthesia, and facilitate removal of an insect or other foreign body trapped in the ear.

Instillation of eardrops is usually contraindicated if the patient has a perforated eardrum but may be permitted with certain medications and adherence to sterile technique. Other conditions may also prohibit instillation of certain medications into the ear. For example, instillation of drops containing hydrocortisone is contraindicated if a patient has herpes, another viral infection, or a fungal infection.<sup>1</sup>
- Equipment**
  - Prescribed eardrops
  - Light source
  - Facial tissue
  - Optional: gloves, cotton-tipped applicator
- Preparation of Equipment**

Allow the medication to reach room temperature before administration or warm the solution by gently rotating the container in your hands. *Instilling cold eardrops can cause dizziness and nausea.*
- Implementation**
  - Avoid distractions and interruptions when preparing and administering the medication to prevent medication errors.<sup>2 3</sup>
  - Verify the practitioner's order.<sup>4 5 6 7</sup>
  - Gather and prepare the medication and the equipment.
  - Compare the medication label to the order in the patient's medical record.<sup>4 5 6 7</sup>
  - Check the patient's medical record for an allergy or a contraindication to the prescribed medication.<sup>4 5 6 7</sup> If an allergy or a contraindication exists, don't administer the medication; instead, notify the practitioner.
  - Check the expiration date on the medication.<sup>4 5 6 7</sup> If the medication is expired, return it to the pharmacy and obtain new medication.
  - Visually inspect the medication for particles, discoloration, or other signs of loss of integrity; don't administer the medication if its integrity is compromised.<sup>4 5 6 7</sup>
  - Discuss any unresolved concerns about the medication with the patient's practitioner.<sup>4 5 6 7</sup>
  - Perform hand hygiene.<sup>8 9 10 11 12 13</sup>
  - Confirm the patient's identity using at least two patient identifiers.<sup>14</sup>
  - Provide privacy.<sup>15 16 17 18</sup>

**Right Document (Quicklist):**

- Procedure** Skills Checklists Quick Lists Images Videos
- Eardrop instillation**
- Eardrop instillation**
  - Avoid distractions and interruptions.
  - Verify the order.
  - Gather and prepare the medication and equipment.
  - Compare the medication label to the order.
  - Check the patient's medical record for an allergy or contraindication to the prescribed medication.
  - Check the expiration date on the medication.
  - Visually inspect the medication for particles, discoloration, or other signs of loss of integrity.
  - Discuss any unresolved concerns about the medication with the patient's practitioner.
  - Perform hand hygiene.
  - Confirm the patient's identity.
  - Provide privacy.
  - If the patient is receiving the medication for the first time, teach him about potential adverse effects or other concerns related to the medication.
  - Verify that the medication is being administered at the proper time, in the prescribed dose, and by the correct route.
  - Confirm in which ear you must administer the medication.
  - If your facility uses a barcode scanning system, use it.
  - Explain the procedure to the patient.
  - Put on gloves as needed.
  - Have the patient sit or lie with his head turned to the unaffected side.
  - Straighten and examine the ear canal, and then remove any drainage.
  - Holding the ear canal straight, instill the ordered number of eardrops.
  - Massage the tragus.
  - Instruct the patient to remain with his head to the side and ear canal open for 3 to 5 minutes.
  - Place a cotton ball loosely in the opening of the ear canal, if ordered.
  - Clean and dry the outer ear.
  - Repeat the procedure in the other ear after 3 to 5 minutes, if ordered.
  - Assist the patient into a comfortable position.
  - Remove and discard your gloves if worn.
  - Perform hand hygiene.
  - Document the procedure.

# 이미지

Procedure Skills Checklists Quick Lists Images Videos

Introduction

Equipment

Preparation of Equipment

Implementation

Special Considerations

Complications

Documentation

References

Additional References

(View and Print Selected)

Eardrop instillation

Revised: A 12, 2016

Introduction

Eardrops treat infection and inflammation, soften cerumen for later removal, produce local anesthesia, and facilitate removal of an insect or other foreign body trapped in the ear.

Instillation of eardrops is usually contraindicated if the patient has a perforated eardrum but may be permitted with certain medications and adherence to sterile technique. Other conditions may also prohibit instillation of certain medications into the ear. For example, instillation of drops containing hydrocortisone is contraindicated if a patient has herpes, another viral infection, or a fungal infection.<sup>1</sup>

Equipment

- Prescribed eardrops
- Light source
- Facial tissue
- Optional: gloves, cotton-tipped applicator

Preparation of Equipment

Allow the medication to reach room temperature before administration or warm the solution by gently rotating the container in your hands. *Instilling cold eardrops can cause dizziness and nausea.*

Implementation


- Avoid distractions and interruptions when preparing and administering the medication to *prevent medication errors.*<sup>2 3</sup>
- Verify the practitioner's order.<sup>4 5 6 7</sup>
- Gather and prepare the medication and the equipment.
- Compare the medication label to the order in the patient's medical record.<sup>4 5 6 7</sup>
- Check the patient's medical record for an allergy or a contraindication to the prescribed medication. <sup>4 5 6 7</sup> If an allergy or a contraindication exists, don't administer the medication; instead, notify the practitioner.
- Check the expiration date on the medication.<sup>4 5 6 7</sup> If the medication is expired, return it to the pharmacy and obtain new medication.
- Visually inspect the medication for particles, discoloration, or other signs of loss of integrity; don't administer the medication if its integrity is compromised.<sup>4 5 6 7</sup>

Eardrop instillation, AU

Procedure Skills Checklists Quick Lists Images Videos


Straightening the ...

Straightening the ear canal in an adult




3/14/2018 Lippincott Procedures - Images for: Antiembolism stocking application, knee-length, AU

Continue to pull up the stocking



(이미지, 다이어그램, 차트 및 인쇄 미리 보기 등)

 Wolters Kluwer

 연세대학교 간호대학

Search Query All Procedures and Advisor Content Admin Tools My Account Lippincott Advisor

<< Browse All Documents

Eardrop instillation, AU

Procedure Skills Checklists Quick Lists Images Videos

- Introduction
- Equipment
- Preparation of Equipment
- Implementation
- Special Considerations
- Patient Teaching
- Complications
- Documentation
- References
- Additional References

(View and Print Selected)

## Eardrop instillation, AU

Introduced: March 02, 2018

### Introduction

Eardrops treat infection and inflammation, soften cerumen for later removal, produce local anaesthesia, and facilitate removal of an insect or other foreign body trapped in the ear. Instillation of eardrops is usually contraindicated if the patient has a perforated eardrum but may be permitted with certain medications and adherence to sterile no-touch technique. Other conditions may also prohibit instillation of certain medications into the ear. For example, instillation of drops containing hydrocortisone is contraindicated if a patient has herpes, another viral infection, or a fungal infection.<sup>[1]</sup>

### Equipment

- Prescribed eardrops
- Light source
- Facial tissue
- Optional: gloves, cotton-tipped applicator, cotton balls, ear irrigation

### Preparation of Equipment

Allow the ear medication to reach room temperature before administration, or warm the solution by gently rotating the container in your hands. *Instilling cold eardrops can cause dizziness and nausea.*

### Implementation

- Avoid distractions and interruptions when preparing and administering the medication to prevent

Search Query All Procedures and Advisor Content Admin Tools My

<< Browse All Documents

Eardrop instillation, AU

Procedure Skills Checklists Quick Lists Images Videos

Positioning the pa...  
Straightening the ...  
Instilling the ear...

Positioning the patient

Play Now

Procedure Video

0:03 / 0:08

- ☒ Introduction
- ☒ Equipment
- ☒ Preparation of Equipment
- ☒ Implementation
- ☒ Special Considerations
- ☒ Patient Teaching
- ☒ Complications
- ☒ Documentation
- ☒ References
- ☒ Additional References

(View and Print Selected)



If you're using an enema solution contained within a disposable squeeze bottle, no preparation is needed. Check the expiration date. If the solution is expired, do not use it. If the solution looks defective, do not use it. Report the expiration or defect as directed by your facility.

비디오 아이콘 클릭하여 비디오 링크

### ■ Implementation

- Avoid distractions and interruptions when preparing and administering an enema *to prevent errors.*<sup>[5][6]</sup>
- Verify the practitioner's order on the patient's medication record.<sup>[7]</sup>
- If the enema is prescribed with medication, or if the enema order is not clear, reconcile the enema solution and medication *to reduce the risk of errors, including omissions, duplications, dosing*

해당 번호 클릭하여 참고 자료 확인

11. World Health Organization. (2009). "WHO guidelines on hand hygiene in health care: First global patient safety challenge, clean care is safer care" [Online]. Accessed July 2019 via the Web at [http://apps.who.int/iris/bitstream/10665/44102/1/9789241597906\\_eng.pdf](http://apps.who.int/iris/bitstream/10665/44102/1/9789241597906_eng.pdf) (Level IV)

- ☒ Introduction
- ☒ Equipment
- ☒ Preparation of Equipment
- ☒ Implementation
- ☒ Special Considerations
- ☒ Patient Teaching
- ☒ Complications
- ☒ Documentation
- ☒ References
- ☒ Additional References

(View and Print Selected)

- Confirm the ear in which the medication must be administered.
- If your facility uses barcode technology, scan your identification badge, the patient's identification bracelet, and the medication's barcode.
- Raise the patient's bed to waist level when providing patient care *to prevent carer back strain*.<sup>3</sup>
- Perform hand hygiene.<sup>5 6 7 8</sup>
- Put on gloves as needed *to comply with standard precautions*.<sup>7 8</sup>
- Have the patient sit or lie with the head turned to the unaffected side.

#### Procedure Video



anna) of the ear up and back. (See

hed to the unaffected side. Then  
up and back (as shown below)



## ■ Additional References

- Safdar, N., et al. (2013). Arterial catheter-related bloodstream infections: Incidence, pathogenesis, risk factors and prevention. *Journal of Hospital Infection*, 85, 189–95.(Level II)
- Urden, L. D., et al. (2016). *Priorities in critical care nursing* (7th ed.). St. Louis, MO: Mosby.
- Campbell, J. *Arterial Lines; replacement*. The Joanna Briggs Institute EBP Database, JBI@Ovid.2017; JBI17413

### **Rating System for the Hierarchy of Evidence for Intervention/Treatment Questions**




The following leveling system is from *Evidence-Based Practice in Nursing and Healthcare: A Guide to Best Practice* (2<sup>nd</sup> ed.) by Bernadette Mazurek Melnyk and Ellen Fineout-Overholt.

- Level I: Evidence from a systematic review or meta-analysis of all relevant randomized controlled trials (RCTs)
- Level II: Evidence obtained from well-designed RCTs
- Level III: Evidence obtained from well-designed controlled trials without randomization
- Level IV: Evidence from well-designed case-control and cohort studies
- Level V: Evidence from systematic reviews of descriptive and qualitative studies
- Level VI: Evidence from single descriptive or qualitative studies

# 테스트와 과제

Learning Management System으로 활용가능

Lippincott  
Procedures


Search Query   All Procedures Content         

« Browse All Documents

**Administration Tools**

Users   Disciplines/Categories   Content Management   **Assignments**   Assignment Records   Facility   Updates   Community

**Maintain Assignments**

Select a Discipline or Category:   Select Skills Checklists and/or Tests (Skills Checklists, Tests)   Search Procedures 

<input checked="" type="checkbox"/> Long term care	<input type="checkbox"/> 12- or 24-hour timed urine specimen collection
<input checked="" type="checkbox"/> Midwifery	<input type="checkbox"/> Skills Checklist: 12- or 24-hour timed urine specimen collection, indwelling urinary catheter specimen
<input checked="" type="checkbox"/> <b>Nursing</b>	<input type="checkbox"/> Skills Checklist: 12- or 24-hour timed urine specimen collection, voided specimen
<input checked="" type="checkbox"/> Nursing 2014	<input type="checkbox"/> Test
<input checked="" type="checkbox"/> Paediatrics	<input checked="" type="checkbox"/> 12-lead electrocardiogram (ECG)
<input checked="" type="checkbox"/> Physical Therapy	<input type="checkbox"/> Skills Checklist
<input checked="" type="checkbox"/> Respiratory Therapy	<input checked="" type="checkbox"/> Test
	<input type="checkbox"/> 12-lead electrocardiogram (ECG) interpretation (Advanced practice)
	<input type="checkbox"/> Skills Checklist
	<input type="checkbox"/> Test
	<input type="checkbox"/> 12-lead electrocardiogram (ECG), ambulatory care
	<input type="checkbox"/> Skills Checklist
	<input type="checkbox"/> Test
	<input type="checkbox"/> 12-lead electrocardiogram (ECG), Pediatric Year 2 student
	<input type="checkbox"/> Skills Checklist
	<input type="checkbox"/> Test
	<input type="checkbox"/> 15-lead electrocardiogram (ECG)
	<input type="checkbox"/> Skills Checklist
	<input type="checkbox"/> Test
	<input type="checkbox"/> 18-lead electrocardiogram (ECG)
	<input type="checkbox"/> Skills Checklist
	<input type="checkbox"/> Test
	<input type="checkbox"/> 2-hour timed urine specimen collection, pediatric
	<input type="checkbox"/> Skills Checklist: 2-hour timed urine specimen collection, indwelling urinary catheter specimen, pediatric
	<input type="checkbox"/> Skills Checklist: 2-hour timed urine specimen collection, voided specimen, pediatric
	<input type="checkbox"/> Test
	<input type="checkbox"/> 24-hour timed urine specimen collection using a pediatric urine collection bag

**Assign**

**Manage Curriculums**

**Assign Curriculum**

# 간호학 전문 자료를 얻는 방법



## 교육 현장에서

- Bates Visual Guide
- Lippincott Procedures/Advisor

## 임상 현장에서

- Lippincott Procedures/Advisor
- JBI Recommended Practice
- LWW / OVID Journals

감사합니다.



Wolters Kluwer

