Mosby's Nursing Video Skills

Procedure Guideline for Applying an Estrogen Patch or Nitroglycerin Ointment

1. Take the medication to the patient at the correct time (refer to agency policy). Give time-critical medications (that is, stat and "now" doses) at the exact time ordered. During administration, apply the Six Rights of Medication Administration
2. Refer to the video skills "Applying Topical Medication" and "Ensuring the Six Rights of Medication Administration" before performing this skill.
3. Perform hand hygiene.
4. Provide for the patient's privacy.
5. Introduce yourself to the patient and family, if present.
6. Identify the patient using two identifiers according to agency policy. Compare these identifiers with the information in the patient's MAR or medical record. Ask the patient if he or she has allergies.
7. Before applying a topical medication, verify the health care provider's orders.
8. Assist the patient into a comfortable position.
9. Compare the MAR or computer printout with the names of the medications on the medication labels, twice. Do a third check at the bedside. Notice the expiration date on the medication.
10. Discuss the purpose of each medication, its action, and possible adverse effects. Allow the patient to ask questions about the drugs.
11. **To apply an estrogen patch:**
    A. Put on clean gloves.
    B. Remove the used patch. It may be necessary to check between the skin folds to find it.
    C. Fold the used patch in half with sticky sides together. Dispose of the used patch in the appropriate trash receptacle.
    D. If needed, wipe the skin clean.
    E. Remove gloves and discard in appropriate receptacle.
    F. Using a soft-tip or felt-tip marker, write the date, time, and your initials on the new patch.

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G. Apply clean gloves.

H. Select a clean, dry site with intact skin that is away from the previous site and free of hair. Avoid previous used sites for at least a week. Avoid sites where the skin in oily, burned, cut or irritated.

I. Estrogen patches are commonly applied to the flat areas of the abdomen, hips, and thighs. They should **never** be applied on or near to the breast or waistline.

J. Carefully remove the patch from its protective cover, holding it by the edge without touching the adhesive.

K. Immediately apply the patch and press it firmly with your hand for 10 seconds. Make sure the patch adheres well, especially around the edges.

L. Explain precautions for patch use. Stress that the patient must not: cut the patch (to lower the dose), use a heating pad on or near the patch, reuse the same site within 1 week, or use other forms of the drug simultaneously with the patch.

12. Nitroglycerin ointment is available as a transdermal patch or as an ointment. **To apply an antianginal (nitroglycerin) ointment:**

A. Apply clean gloves.

B. Remove the previous dose measuring paper. Fold the used paper containing any residual medication with used sides together. Wipe off any residual medication with a tissue, and discard it in an appropriate trash receptacle with your gloves.

C. With a felt-tip pen, write the date, time, and initials on the new application paper.

D. Apply clean gloves.

E. Measure the ointment on the dosing paper according to the health care provider's orders.

F. Antianginal (nitroglycerin) ointments are usually ordered in inches measured on application dosing paper marked off in half-inch increments. Unit-dose packages are available. Apply the desired number of inches of ointment to the paper measuring guide.

G. Select a new application site: Apply nitroglycerin ointment to the chest, back, abdomen, or anterior thigh. Do not apply on hairy surfaces or over scar tissue, which may interfere with absorption.

H. Be sure to rotate application sites.

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I. Apply ointment to the skin surface by holding the edge or back of the paper measuring guide and placing the ointment and wrapper directly on the skin. Do not rub or massage the ointment into the skin.

J. Secure the ointment and paper with a transparent dressing or strip of tape. Plastic wrap may be used as an occlusive dressing.

13. Remove and dispose of gloves. Perform hand hygiene.

14. With all transdermal applications, remind the patient to keep a journal/diary of doses and application sites.

15. Help the patient into a comfortable position, and place toiletries and personal items within reach.

16. Place the call button within easy reach, and make sure the patient knows how to use it to summon assistance.

17. To ensure the patient's safety, raise the appropriate number of side rails and lower the bed to the lowest position.

18. Dispose of used supplies and equipment. Leave the patient's room tidy.

19. Document and report the patient's response and expected or unexpected outcomes. Document on the MAR that medication was administered and the site of application according to agency policy.

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