

## Nursing Instructions

### Ingrown Toenail Removal

#### Patient Preparation

The patient is comfortably seated on the table, with knees bent and feet flat on the table; or legs fully extended and feet extended just beyond the end of the table. An absorbent pad is placed beneath the feet on the table and floor.

#### Nonsterile Tray for Anesthesia

Place the following items on a nonsterile drape covering a Mayo stand:

Nonsterile gloves

10-mL syringe filled with 1 percent lidocaine (Xylocaine) and a 30-gauge needle

Sterile 4 X 4 gauze soaked with povidone-iodine solution

Fenestrated drape

Iris scissors

Bandage scissors

Two pairs of straight hemostats

Sterile rubber band (if desired)

Nail splitter (if desired)

#### Electrosurgical Cart

Electrosurgical generator

2-mm and 4-mm matricectomy electrodes

5-mm ball electrode (if desired)

Smoke evacuator with small-particle (viral) filtering system

#### Postprocedure Dressing

2 inches of 4 X 4 gauze unfolded into long strips

Roll of 1-inch tape

Antibiotic ointment

Surgical sponge slipper to wear over the bandaged toe

#### Postprocedure Nursing Instructions

The antibiotic ointment is liberally applied to the wound. The unfolded gauze is wrapped over the toe, creating a bulky dressing. Longitudinal strips of tape are placed from the top of the foot to the underside of the foot, covering the toe but not constricting blood flow to the toe. The sponge surgical slipper is applied over the entire foot.

Soiled gauze is disposed of in a biohazard waste container. The instruments are washed and sterilized.

The matricectomy electrodes are carefully cleaned of all char, using sandpaper, if needed, on the bare metal portion of the electrode (but not on the Teflon-coated side). The electrode should be soaked in disinfectant solution or autoclaved before the next use.

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*Adapted with permission from Zuber TJ. Office procedures. Baltimore: Lippincott Williams & Wilkins, 1999.*