

COMMUNICATION ROOM AND ALGORITHM FOR PERFORMING COMMUNICATION OPERATION IN IT

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Abstract: This scientific article provides information about the medical dressing room, which is used for dressing procedures in medicine, and about performing dressing procedures in it. It is known that today every surgical department should be well-equipped, meet the requirements of asepsis and current sanitary standards. The article provides useful concepts about the dressing room equipment, the procedure for using equipment, and dressing procedures. In addition, the 5 stages of performing dressing procedures are explained in detail.

Keywords: medical dressing room, “clean” and “purulent” dressing procedures, dressing table, nurse, individual set, medical dressing materials, disinfectant, bandage.

In modern medicine, each surgical department should be well-equipped, meet the requirements of asepsis and current sanitary standards. The dressing room is a room intended for medical dressing procedures, and is specially allocated for “clean” and “purulent” dressing procedures. Sometimes the dressing room can be used for diagnostic purposes. The square area of the dressing room should be 15 square meters - this is for one dressing table, and 30 square meters if there are two. The dressing room should be fully equipped with the necessary equipment, devices and instruments. If there is only one dressing room, the treatment of purulent wounds is carried out after the treatment of clean wounds, then the rooms and all equipment are thoroughly treated with disinfectant solutions. The sequence of dressings is planned taking into account the cleanliness of the wounds. When performing dressing work, medical dressing sets should be individual for each person. The composition of dressing sets is determined by the simplicity or complexity of the type of dressing. Each department equips the set based on its own work methods. If there is no individual set for each patient, the dressing table is spread out once a day for 6 hours. In this case, a sterile bag with dressing materials should be kept in reserve for emergency situations. Before starting work, the surfaces of all equipment in the room are wiped with a disinfectant. After making sure that the room is ready for work, work begins. The ward nurse should wear a simple gown, white pants, a hat, slippers (with closed toes), and a mask, without unnecessary decorations, jewelry, nails should be cut off, and not painted with varnish. The ward nurse is directly assisted by a junior medical worker in organizing work. After putting on the mask, the nurse performs hygienic treatment of hands with liquid soap. It should be noted that if hands are washed hygienically once, the number of transient microbes on the hands decreases by 40%, and when washed again, by 70%. The clamps are fastened to both

tables, the date and time are written on the labels, and the temperature indicator is recorded in the appropriate notebook. Work begins.

The connection process consists of 5 steps:

- 1- Removing the bandage. There is also a special method for removing the bandage. We remove the bandage carefully from the wound, using circular movements. If it is wet (soaked) or contaminated with a large amount of blood, in this case we cut it off with Richter scissors, and when removing the adhesive bandages, we soak the ends in alcohol to avoid irritating the skin.
- 2- Cleaning the wound area. The wound area is gently wiped with alcohol. Fabric threads and blood residues stuck to the wound are removed. The tampon, drains, rubber tubes from the wound are removed, and dead tissue around the wound is removed with scissors.
- 3- Treatment procedures. First, the wound is washed with antiseptics. Dry. Hypertonic solutions, the use of furacilin or antibiotics, regenerating drugs, ointments, in general, local treatment procedures are performed depending on the condition of the wound.
- 4- Applying an aseptic dressing. When applying an aseptic dressing (sterile napkin), it is necessary to take into account the location of the wound, its small size or spread.
- 5- Fastening the bandage. The nurse fastens the bandage with a plaster or bandage. The bandages are wrapped in a spiral, not tightening, overlapping each other. The plaster bandages are fastened without tension, avoiding hairy areas of the skin.

After each dressing, medical dressing table is wiped with a disinfectant, gloves are changed. Here it is worth mentioning one thing. There is a time interval between dressings, which depends on the chlorine activity of the disinfectant we use, and the sensitivity of microorganisms to it. The higher the chlorine activity, the shorter the interval time and vice versa.

Repeatedly used medical instruments are disinfected after each dressing (according to the instructions for each disinfectant) by immersing them in a chlorine-containing solution for 10 minutes. Then, repeated medical instruments are transferred to centralized sterilization departments for sterilization. Waste is sorted into classes and disposed of in accordance with current sanitary rules and regulations. The room is finally cleaned and disinfected for 30 minutes using a bactericidal lamp.

The list of used literature:

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