



## Scarborough College

### EYE IRRIGATION POLICY

*This is a whole College policy, including EYFS and the boarding community.*

This policy has been written in line with information provided by CLEAPSS and The Royal Marsden Manual of Clinical Nursing Procedures, (9<sup>th</sup> edition). Eye irrigation is usually performed to remove a foreign body or caustic substance from the eye as soon as possible to minimize the damage. Scarborough College recognizes that the general responsibility of schools for taking reasonable care of the pupils in their charge is enshrined in common law under the 'in loco parentis' doctrine. Although Health and Safety legislation does not specifically cover pupils, the College has a continuing duty to make adequate first aid provision for them and for any visitors on the premises in addition to all their employees.

For chemical burns to the eye it is essential that the eye is irrigated quickly to prevent serious injuries. When irrigating the eye, be particularly careful not to splash the casualty or yourself. Wear protective gloves.

CLEAPSS Hazcards/website is where all our chemical safety information is stored, located in the S1 chemistry preparation room. These cards advise the duration of irrigation and whether it is necessary for the casualty to attend the accident and emergency department

The eyewash tube can be found in the eye irrigation bag close to the sink in both preparation rooms and S10.

#### Using the Eyewash Tube

- Is the situation/area safe? If not make it safe.
- Ensure the School Nurse is contacted.
- Do not allow the casualty to touch the injured eye; do not remove a contact lens.
- Lean the casualty over the sink, affected eye tilted downwards to prevent unaffected eye being contaminated.
- If available drape shoulders with a towel to protect clothes from getting wet.
- Push the eyewash tube onto the cold water tap.
- Turn the tap on at low pressure and place the open end of the tube on the bridge of the casualty's nose to ensure that contaminated water does not splash the uninjured eye.
- If the eye is shut in a spasm of pain, gently but firmly pull the eyelids open and wash across the surface of the eye. Make sure that you irrigate both sides of the eyelid thoroughly. If both eyes are affected rinse each eye alternately and ensure that both eyes are irrigated as quickly as possible. Continue to alternate between eyes and ensure that irrigation is carried out for the required duration. For chemical contamination this should be at least ten minutes. Pat eye and area with sterile gauze which is provided.
- The eyewash tube should be disposed after use. Ensure replacement is put in place with new gloves and gauze.
- Complete an accident form which is located in the Medical Centre, and report to the Head of Department and Health and Safety Co-ordinator.

**Policy Last Reviewed** – September 2019



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### PROTOCOL

- 1 **Is the situation safe?** If not make it safe.
- 2 Move the casualty to a quiet area and sit them down.
- 3 Telephone the School Nurse on extension **212** or mobile **07974305104**.
- 4 If unclear about how to proceed with chemical incidents, locate **HAZCARDS** which is in the chemistry preparation room, in a black file which is labelled, or call **CLEAPSS 01895 251496**.
- 5 Put eye irrigation tube firmly on tap.
- 6 Put on a pair of gloves from the first aid box.
- 7 Lean the casualty towards the side of the injured eye.
- 8 Stand behind the casualty.
- 9 Hold the affected eyelids apart using your first and second finger against the orbital ridge.
- 10 Warn the patient the liquid is going to pass across the eye onto to towel.
- 11 Allow the solution to flow across the eye from inside towards the ear.
- 12 Ask the patient to look up and down and to either side.
- 13 Evert upper and lower lids whilst irrigating
- 14 Use gauze from the first aid box to stop solution wetting clothes.
- 15 Ensure that any solution spilled on to the floor is cleaned up immediately to prevent it becoming a **SLIP HAZARD!**
- 16 Complete an accident record form which is located in the medical centre, and report to the head of department, and Health and Safety Co-ordinator.

*Protocol Last Reviewed* – September 2019