

**HACKETTSTOWN REGIONAL MEDICAL CENTER
NURSING POLICIES
COLD THERAPY UNIT**

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Effective Date: August 4, 1995
Cross Referenced: 8620.251
Reviewed Date: 11/10
Revised Date: 12/15/15

Policy No: 8620.165a
Origin: Department of Nursing
Authority: Chief Nursing Officer
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SCOPE

All nurses in surgical services and inpatient units.

PURPOSE

To provide safe cooling to operative site after surgery to facilitate the immediate recovery stage.

DEFINITIONS

Polar Care- Motorized cold therapy unit.
Active Wrap- Gel pack cold therapy wrap.

POLICY

By utilizing the Cold Therapy Unit, the patient will receive increased pain control, less edema, and adequate compression to the operative site.

PROCEDURE- Polar Care

I. Equipment List

1. T505 Cold Temperature Therapy Unit
2. Power Adaptor
3. Therapy Blanket
4. Ice and Tap Water

II. Set up

1. Wash Hands
2. Bring pad to OR at start of case.
3. Fill cooler with ice to fill line.
4. Add water until ice is afloat. Screw the lid on tightly and evenly.
5. Attach the therapy blanket fittings to the unit hose. Push each fitting together until you hear a click.
6. Plug the power adapter into the back of the unit then into a properly grounded wall outlet.
7. Place the therapy blanket over treatment area with clear side toward covered skin and secure
8. A green light will illuminate, signaling that the unit is running
9. A red light indicates that the water temperature is too warm and it has stopped running, empty unit and follow steps 2-3.
10. To maximize efficiency, place the unit at or above the treatment site level.
11. Check ice every two to four hours and replace before it has completely melted.
12. Inspect skin/dressing integrity/temperature in area receiving cold treatment regularly during use.

III. End Session

1. To stop pump, unplug power adaptor from electrical wall outlet with dry hands. Then

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- unplug from the back of the unit.
2. Disconnect hose tubes from the unit and therapy blanket by pushing each metal button at the connection points.

PROCEDURE- Active Wrap

I. Equipment List

1. Compression wrap
2. Ice packs
3. Plastic zip top bags
4. Freezer

II. Set up

1. Wash hands
2. Bring compression wrap to OR at start of case. Place ice packs in zip top bags in PACU freezer, labeled with patient's FIN number.
3. Apply frozen ice packs in PACU.
4. Insert new ice packs q 4 hours on the following schedule: 0000, 0400, 0800, 1200, 1600, 2000.
5. Clean ice packs with hospital approved wipes and place in labeled plastic bag. Place plastic bag with ice pack in the cold therapy designated freezer.
6. Inspect skin/dressing integrity/temperature receiving cold therapy regularly during use.
7. Upon discharge, compression wrap and ice packs sent home with patient.

DOCUMENTATION

- A. Document baseline **skin/dressing** assessment
- B. Document condition of skin/dressing **of where the ice is applied** every shift.
- C. Document ice and water change when using polar care
- D. Document application of ice packs when using active wrap
- E. Document duration of treatment.

REFERENCES

T505 Cold Temperature Therapy Unit User Guide, copyright 2013 DeRoyal Industries, Inc.
<http://activewrap.com/pages/use-instructions>