# Attaching and Removing a Scalpel Blade



#### <u>Disclaimer</u>

A series of booklets (instructions for skills and flipped classroom materials) has been developed by the Clinical Skills Lab team (staff, recent graduates and students) from Bristol Veterinary School, University of Bristol, UK.

#### Please note:

- Each flipped classroom booklet includes ways to prepare for learning a skill in class; it is
  acknowledged that there are often other approaches. Before using the booklets, students
  should check with their university or college to determine whether the approaches illustrated
  are acceptable in their context or whether an alternative resources should be used.
- The booklets are made available in good faith and may be subject to changes.
- In using these booklets, you must adopt safe working procedures and take your own risk
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# Equipment list:

## Scalpel Blade

#### Equipment for this station:

- Scalpel blade
- Scalpel handle (holder)
- Forceps
- Sharps bin

#### Considerations for this station:

- Be careful when handling sharps; never direct the blade towards yourself or others
- Ensure sharps are disposed of in a sharps bin
- For more information, please refer to General risk assessment form 'Scalpel blades CSL R02' (in the CSL)

Anyone working in the Clinical Skills Lab must read the 'CSL\_I01 Induction' and agree to abide by the 'CSL\_I00 House Rules' & 'CSL\_I02 Lab Area Rules'

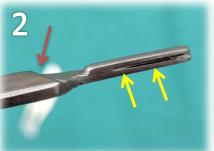
Please inform a member of staff if equipment is damaged or about to run out.



## Clinical Skills:

## Attaching a Scalpel Blade







Open the scalpel packet by peeling the tabs at the end. Drop the scalpel blade onto a sterile surface without touching it (if you are sterile this may be done by another person).

On the tip of the scalpel handle there is a groove on the side. This is where the blade sits (yellow arrows). There is also a diagonal line on top, this should be facing upwards (red arrow).

Pick up the scalpel blade using your non-dominant hand. Make sure to grasp the bottom of the blade, not over the sharp edge. Using forceps in your dominant hand, grasp the blade. The blade should be held by the forceps on the blunt side, above the slot for the handle.



Pick up the handle in your non-dominant hand and position it underneath the blade. Check the diagonal lines on the handle and the blade are parallel (yellow arrows).



Insert the tip of the handle into the wide part of the blade slot, approaching from underneath and aiming slightly upwards. Do not go all the way through the slot.

Slide the handle forward into the slot, the narrow part of the slot will fit into the grooves on the side of the handle.



You may hear a click when the blade slides into the correct position, and it should now be firmly attached to the handle. To check, grasp the blade with the forceps and wiggle the blade forwards and backwards, it should not come off.

TIP: Make sure that the size of the scalpel blade and handle are compatible – particularly important if going on a visit as there may not be a spare one available!



# Clinical Skills:

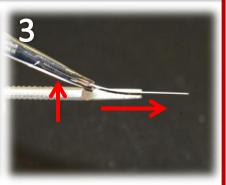
## Removing a Scalpel Blade



Use artery forceps or needle holders to grasp the end of the blade nearest the handle on the blunt edge. The angle between the forceps and scalpel handle should be approximately 30°.



Lift up the blade, bending it slightly (while being careful not to snap the blade) and slide it forward and off the handle, pointing slightly downwards and always away from you and others.



This is an enlarged image with arrows illustrating the movements in step 2.



The blade is moved forward and free from (off) the handle.



Dispose of the blade in a sharps bin.

Do not leave the blade lying around in a surgical pack or anywhere else; it is your responsibility to dispose of the blade safely.



# Resetting the station: Scalpel Blade

- 1. Remove the blade from the scalpel handle
- 2. Dispose of blade in a sharps bin
- 3. Leave all instruments tidily in a tray

#### Station ready for the next person:



Please inform a member of staff if equipment is damaged or about to run out.