



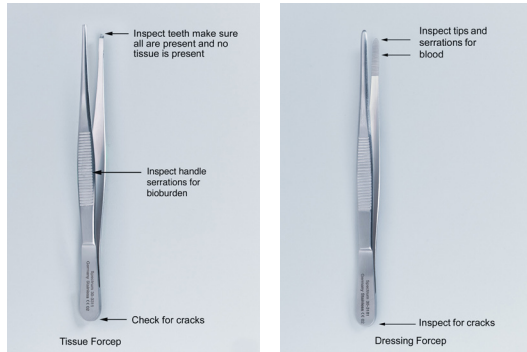
From Good to Great

Advanced Understanding of Tissue and Dressing Forceps

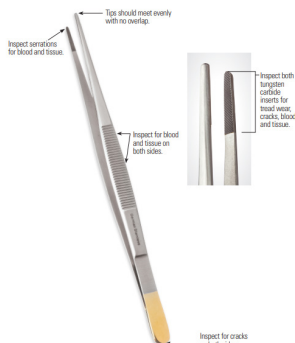


BY RICK SCHULTZ

Every surgical tray contains tissue and dressing forceps. This instrument category is quite simple to inspect; however, inspection of forceps is often not given the attention it deserves. To determine whether a forcep is a tissue forcep or a dressing forcep, it is helpful to think that the letter T stands for teeth and tissue. If a forcep has teeth, regardless of how many, it is a tissue forcep. If the forcep has serrations but no teeth, it is a dressing forcep.



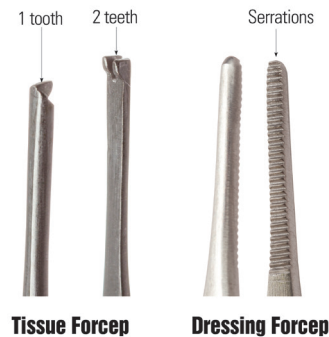
The more complex forceps are the Potts-Smith dressing forceps with tungsten carbide distal tips and the DeBakey and Cooley vascular forceps, which contain atraumatic serrations at the distal tips.



Read the following and then answer the five-question quiz to test your comprehension of the content and be entered for a chance to win a set of the author's Instrument Coaching Cards™. To submit your answers, see the instructions and QR code at the end of the quiz.

Q: What is the difference between a tissue and dressing forcep?

A: Tissue forceps have teeth (i.e., 1x2, 2x3, 3x4). Each number indicates the number of teeth per side. These forceps are designed to grasp and manipulate tissue. Dressing forceps have serrations instead of teeth and are designed to grasp and hold gauze and dressings during a surgical procedure.



Q: What is a rat tooth forcep?

A: The nickname “rat tooth” commonly refers to the 1x2 Adson or 1x2 tissue forcep. Other forceps with 1x2 teeth are also sometimes called rat tooth.

Q: Why do some forceps have holes in the handles?

A: The holes in the handles give a forcep a lightweight design. Common forcep patterns are the Adson and Bishop-Harmon.

**Q: Why do some forceps have a gold handle?**

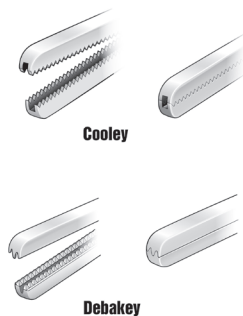
A: Similar to handles on a needle holder and rings on a scissor, gold on a forcep indicates that it has tungsten carbide jaws. In addition to grasping tissue, the tungsten carbide jaws are used to grasp suture needles.

Q: Why are some forceps blue in color?

A: The blue color on a forcep indicates it is made of titanium. Titanium forceps are lightweight, non-magnetic, and stronger than stainless steel forceps; however, they are also more costly.

Q: Why are certain forceps called atraumatic?

A: Atraumatic forceps are designed to minimize damage and trauma to the tissue. The most common styles are Cooley and DeBakey.

**Q: The Operating Room (OR) places forceps on the side of the tray. Is this acceptable?**

A: Yes; however, placing forceps on the side of the tray is a practice occasionally used in the OR to organize and quickly pass a forcep to the sterile field. It is important to use caution to prevent the tips from going through the holes in the bottom of the tray. This may result in damage, bending, and teeth breakage. Forceps damage can be prevented by placing a towel inside the tray on the sterile field so the forceps cannot pass through the holes in the bottom of the tray.

**Q: Can cracks on a forcep be repaired?**

A: No. Cracks, regardless of where they occur on the forcep, cannot be repaired. The instrument must be immediately removed from service and replaced.

Q: Is it acceptable to “wedge” forceps together when assembling the tray?


A: Yes; however, it is very important to gently nest the forceps together. Do not force or jam the forceps together. If there are several forceps in the tray, make two rows instead of one. This will prevent the first forcep from being stretched open.

Quiz

From Good to Great: Advanced Understanding of Tissue and Dressing Forceps

Please answer the five true-and-false (T/F) questions.

1. The tungsten carbide jaws on a forcep are used to grasp suture needles and tissue. They are indicated by gold handles. T/F
2. It is unacceptable to nest forceps together. T/F
3. If a crack is noticed on a forcep during inspection, the instrument must be removed from service and sent out for repair. T/F
4. Dressing forceps have serrations, and tissue forceps have teeth. T/F
5. Atraumatic forceps are designed to minimize tissue damage and trauma. T/F

Scan this QR code to submit your answers online. The deadline to submit is December 8, 2024. All participants' names will be entered into a drawing to win a set of Instrument Coaching Cards™. Good luck! 





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New Technician Training for Tissue and Dressing Forceps

When training new technicians about proper inspection of tissue and dressing forceps, managers and supervisors should focus on:

1. Teaching the difference between a tissue forcep and a dressing forcep.
2. Teaching that the letter “T” is for teeth and tissue forcep.
3. Ensuring the technician learns how to inspect the distal portion of the tissue forcep.
4. Ensuring the technician learns how to inspect the distal portion of the dressing forcep.
5. Ensuring the technician learns where to inspect for cracks at the proximal end.



RICK SCHULTZ, the Instrument Whisperer™, is an author, inventor, lecturer, and the retired Chief Executive Officer of Spectrum Surgical Instruments Corp. He served as contributing editor of HSPA's *Central Service Technical Manual* (fifth, sixth, seventh and eighth editions). Schultz authored the textbooks *Inspecting Surgical Instruments: An Illustrated Guide* and *The World of Surgical Instruments: The Definitive Inspection Textbook*, which was released in June 2018. In October 2021, Schultz published the veterinary medicine textbook *The World of Surgical Instruments for Animal Health*. Schultz was named HSPA's Educator of the Year in 2002 and the American Hospital Association Educator of the Year in 2006. In 2007, he was named by *Healthcare Purchasing News* as one of the 30 Most Influential People in Healthcare Sterile Processing. Schultz currently provides educational lectures to Sterile Processing professionals at HSPA's annual conferences and conducts Operating Room personnel lectures across the country.

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