

Short on Wound VACs, Surgeon Slaps On Hoover

LOS ANGELES, CA - Nearing completion of the debridement of an [infected wound](#) but learning that the hospital was short on wound VACs, University of California-Los Angeles general surgeon William Dyson made the [executive decision](#) to slap on a regular vacuum instead. He went with a Hoover.

“At first, I was stumped because this patient would have really benefitted from wound VAC therapy,” explained Dyson.

“The vacuum situation *sucked*. But then I remembered I recently got this Hoover Windtunnel 3 vacuum cleaner. My wife and I love it. It’s awesome, with kick-ass attachments, and the rest as they say is history.”



Pulling up the Hoover website, Dyson educated us about the aforementioned vacuum. “Look, this patient’s wound may not contain any ‘stubborn pet hair,’ but there is very likely ‘[dirt and debris](#) in every corner and [crevice](#).” He scrolled down some more, equally excited. “Plus, with the 40-foot power cord, we have the freedom to move him up and down the hallways with it still on. How neat is that?!”

Though the [operating room \(OR\)](#) support staff don’t disagree that the use of a household vacuum is brilliant given the shortage, there are some who felt that Dyson picked the wrong Hoover model.

“If you ask me, I would’ve gone with the ultralight cordless Hoover VAC,” said [scrub tech](#) Gillian Eureka-Shark. “If Dyson thinks a 40-foot cord is so great, imagine having [no cord at all](#). Plus, the wound is on this guy’s leg: he could feasibly work with [PT/OT](#), moving his legs all about, with the damn thing still on.”

Wound care nurse Lisa Bissell had another pick. “Dyson should’ve picked those Hoover Quest robot vacuums,” she said, clearly disappointed in the surgeon’s pick. “I mean, it works on its own, it charges itself, and heck, it even runs on Bluetooth, so we don’t even have to return to bedside and interact with the

patient. Now that's what I call a *real* wound VAC."