



## Does your patient have the following signs and symptoms?

- Wound remains static despite optimal wound management and health support
- Poor quality granulation tissue/friable hypergranulation
- Signs of local infection such as: increased exudate, low-level chronic inflammation and erythema
- Wound not responding to appropriate antimicrobial treatment
- History of antibiotic failure or persistent or recurring wound infection
- Wound containing a “foreign” material (e.g. fibrin, necrosis and/or slimy surface substance) on wound surface

No ➤

Complete wound assessment & implement standard wound management protocol

Yes ➤

Implement Wound Hygiene..

Wound hygiene should be performed following a holistic assessment & when the objective is to kickstart healing by removing and minimising all unwanted materials, including biofilm, devitalised tissue & foreign debris, from the wound


International Wound Infection Institute (IWII) Wound infection in clinical practice. Wounds International 2016 & 2022

## WOUND HYGIENE STEPS

STEP 1 - CLEANSE

CLEANSE the wound and the peri-wound skin

Products required:



STEP 2 - DEBRIDE

DEBRIDE the wound bed

Products required:



STEP 3 - REFASHION

REFASHION the wound edges

Products required:




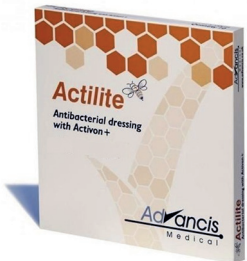

Select method based on skill of clinician

STEP 4 - DRESS

DRESS the wound – Use the right dressing containing antimicrobial and antibiofilm agents.







\*Aquacel® Ag+ Extra™ or Aquacel® Ag+ Ribbon

Required Primary Dressing



OR

Secondary dressing options if required:



\*If AQUACEL® Ag + Extra™ dressing is not appropriate consider other primary dressing with antimicrobial and anti-biofilm properties.

All the above steps **MUST** be completed at each dressing change as agreed. Increase or decrease the intensity of the implementation of each step depending on patient's tolerance and wound progression. Re-assess every 2–4 weeks and discontinue the use of any antimicrobial products when goals are achieved and the wound is showing signs of healing. All Antimicrobials products **MUST** not be used long-term, please refer to Tissue Viability for further clinical advice.



Please **SCAN** QR code or refer to the Tissue Viability Webpage for the formulary