



# Wound infection guidance

Please see overleaf for wound swabbing guide

Consider biofilm



## Contamination/Colonisation:

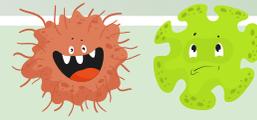
No delay in wound healing observed

Microorganisms present  
No Significant response

### DO NOT SWAB

Use non-medicated wound dressings

Monitor NEWS2 as per parameters



## Local Wound Infection:

Healing not progressing

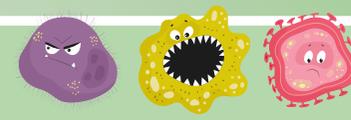
(Two or more signs present)

Covert (subtle)	Overt (classic)
Hypergranulation	Erythema
Bleeding	Warm to touch
Increased exudate	Swelling
Delayed wound healing	Purulent exudate
Erythema	New or increased pain

### DO NOT SWAB

Consider an antimicrobial dressing  
(See note 1)

Monitor NEWS2, fluid monitoring  
Complete baseline observations  
Consider Tissue Viability referral



## Spreading Infection:

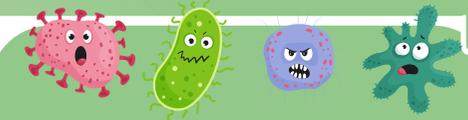
Wound Deteriorating

(Two or more signs present)

Spreading erythema  
Wound Breakdown  
Swelling of lymph gland  
Hardening of tissue  
Lymphangitis (inflammation)  
Crepitus (crackling)

### SWAB WOUND

Consider antibiotics per culture sensitivities  
Consider an antimicrobial dressing  
Refer to medical team  
Monitor NEWS2 inc fluid input/output  
Implement SEPSIS Tool  
Escalate clinical interventions  
Consider referral to specialist services



## Systemic Infection:

Patient systemically unwell

(One or more signs present)

Malaise  
Lethargy or general deterioration  
Loss of appetite  
Fever/Pyrexia  
Severe sepsis  
Septic shock  
Organ failure

### SWAB WOUND

Seek URGENT medical review  
Monitor NEWS2 inc fluid input/output  
Implement SEPSIS Tool  
Prescribe antibiotics per culture sensitivities  
Antimicrobial dressing required  
Refer to specialist services

#### Note 1:

When using an **antimicrobial dressing** follow the steps as directed - use for 14 days then review

**A** If no signs of infection STOP and use non-medicated wound dressings.

**B** If no change consider alternative antimicrobial dressing product.

**C** If improving but still signs of infection continue and review weekly until no signs of infection.

**D** If deteriorating move to next step spreading infection - if at systemic infection refer for urgent medical advice.

#### Note 2:

##### Debridement

Where required use an appropriate method of debridement as per local policy.  
Consider using a topical antiseptic cleanser or surfactant soak.  
Always select dressing based on goals of wound care taking into consideration tissue type and exudate level.

**Malodour** is likely to be present where there is devitalised tissue, however if odour is present in a clean wound or if new odour develops, please consider as a sign of infection.

# Wound swabbing guide

## Step one

### Cleanse and debride the wound

- Clean the wound using warm normal saline
- Debride the wound bed – remove any loose debris, slough, necrosis or dressing remnant from the wound bed in line with local policy
- Repeat wound cleansing using warm normal saline

## Step two

### Moisten the swab tip

Use laboratory swab kit and sterile normal saline

## Step three

### Sample technique

- Obtain sample from cleanest part of wound bed
- Firmly press swab into wound and rotate over 1cm<sup>2</sup> area to express fluid
- Where possible do not obtain sample from pus, slough or necrotic tissue

## Step four

### Label sample and send to laboratory

Be sure to include all relevant patient details including past medical history, wound type, location and any current antibiotic treatment

Ensure sample delivered to laboratory in timely manner

Document in patient notes

## Think Biofilm

Consider presence of biofilm if the following applies:

- Wound not responding to usual standards of care
- Little response to appropriate antimicrobial treatment
- Recurrence of delayed healing on completion of antibiotic treatment
- Increased exudate
- Low level chronic inflammation
- Poor granulation

## ACTION

## Debridement

- Ensure wounds are frequently debrided to remove slough, necrosis, debris and potential biofilm to allow wound healing to occur.
- Biofilms can reform with in 24 hours so frequent debridement is necessary
- Refer to local policy for guidance on debridement