

# Pathway for Wound Infection

**Aim: - To control and manage the wound infection and exudate, decreasing the bacterial burden within the wound bed**

**Definition:** Wound Infection is the invasion of a wound by proliferating microorganisms to a level that invokes a local and/or systemic response in the host (IWII 2016).

**Step 1:** Undertake wound cleansing in accordance with the Wound Cleansing Policy and consider using Prontosan Debridement pad to support soft mechanical debridement.

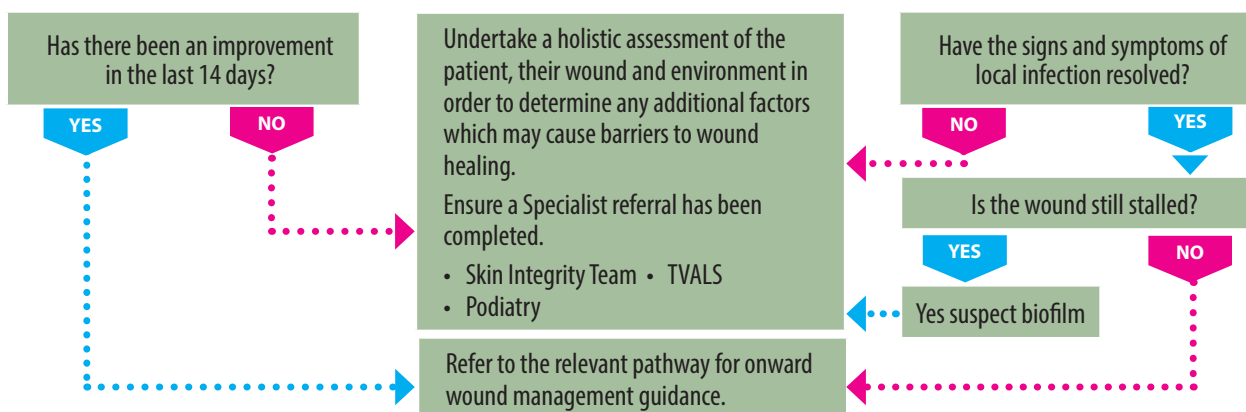
**Step 2:** Undertake a holistic wound assessment in order to establish whether any clinical signs and symptoms of infection are present.

Contamination	Colonisation (Biofilms)	Local infection	Spreading or systemic infection
<ul style="list-style-type: none"> <li>All wounds may acquire micro-organisms</li> <li>Vigilance is required to minimise the gradual increase in number and virulence of microorganisms.</li> </ul>	<ul style="list-style-type: none"> <li>Antibiotic/antimicrobial treatment failure</li> <li>Recurrence of delayed healing on cessation of antibiotic treatment</li> <li>Delayed healing despite optimal wound/patient management</li> <li>Low level chronic inflammation</li> <li>Low level erythema</li> <li>Friable granulation tissue</li> <li>Covert (subtle) signs of infection.</li> </ul>	<ul style="list-style-type: none"> <li>Delayed wound healing</li> <li>Serous drainage with concurrent inflammation</li> <li>Hypergranulation (overgranulation)</li> <li>Bleeding, friable granulation tissue</li> <li>Epithelial bridging and pocketing in granulation tissue</li> <li>Wound breakdown and enlargement</li> <li>New or increasing pain</li> <li>Increasing malodour.</li> <li>Erythema</li> <li>Warmth</li> <li>Oedema/swelling</li> <li>Purulent discharge</li> <li>Pain</li> <li>Increasing malodour</li> <li>Delayed wound healing.</li> </ul>	<ul style="list-style-type: none"> <li>Spreading erythema, warmth</li> <li>May include cellulitis or crepitus</li> <li>Wound breakdown or dehiscence with or without satellite lesions</li> <li>Malaise/lethargy</li> <li>Loss of appetite</li> <li>Systemic inflammatory response</li> <li>Sepsis</li> <li>Organ dysfunction.</li> </ul>

**Step 3:** Dress the wound following the below recommendations per the local formulary:

<ul style="list-style-type: none"> <li>Follow the wound type Pathway recommendations for the Primary and Secondary Dressing..</li> </ul>	<ul style="list-style-type: none"> <li>Manage local bioburden and infection with an Antimicrobial dressing</li> <li>Reassess at each dressing change and follow the two week challenge principles.</li> </ul> <p><b>Two - Week Challenge</b></p> <ul style="list-style-type: none"> <li>Antimicrobial dressings such as ActioCat Flex 3 or 7 are recommended to be used for a minimum of two weeks' duration.</li> <li>After two weeks, re-evaluate and either:                             <ul style="list-style-type: none"> <li>- Discontinue if signs and symptoms of infection have resolved</li> <li>- Continue with the antimicrobial dressing if the wound is progressing but there are still signs and symptoms of wound infection</li> <li>- Consider an alternative antimicrobial dressing and refer to the relevant specialist team.</li> </ul> </li> </ul>	<p><b>Spreading or systemic infection management</b></p> <ul style="list-style-type: none"> <li>Refer to the relevant specialist team</li> <li>Undertake a wound swab for culture and sensitivity</li> <li>Prescribe Systemic antibiotics ensuring antibiotic therapy is compliant with the local formulary and/or advice has been sought from a Medical Microbiologist</li> </ul>
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**Step 4:** Document all wound assessments accordingly and complete onward referrals if required.



If the named product on this pathway is not available a temporary second line product is available to use. This can be found within the main text of the Doncaster Wide Wound Care Formulary Document.