

WOUND CARE **QUICK SHEET**



Appropriate practices in wound care are essential to prevent disease spread and keep your residents safe.

Where to start

- 1. Assess the patient for cellulitis
- 2. Know what organisms occur in your facility: Gram positive organisms? Gram negative organisms? Fungi?

Keep in mind

✓ Use Pressure Ulcer Prevention Bundles Implement Standard Precautions and Transmission-based Precautions appropriately

Treat timely and appropriately

Use Loeb Criteria for antibiotic initiation during skin/soft tissue infection

Principles of Safe Wound Care Practice



- Reusable dressing care equipment (i.e., bandage scissors) should be cleaned or reprocessed if shared between residents.
- Clean wound-dressing supplies should be handled in a way to prevent cross contamination: separate clean supplies from soiled supplies.
- Wound care supplies should remain outside of resident care areas.
- Unused disposable supplies should be discarded after providing care for a resident, or remain dedicated to that resident, and appropriately bagged/boxed and labeled.
- Multi-dose wound care medications such as ointments and creams should be dedicated to a single resident as much as possible, or a small amount must be dispensed into a medication cup outside the treatment area; medication should be appropriately labeled to indicate date it should be discarded; same apply for medication carts and respiratory therapy.





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New or increasing purulent drainage at a wound, skin, or soft-tissue site

Or.

- At least 2 of the following:
- Fever (>37.9C/100F), or 1.5C/2.4F increase above average
- Redness
- Tenderness
- Warmth
- New or increasing swelling

Spaulding Classification

Noncritical Items (contact with intact skin)

Examples: Bandage scissors, hemostats, clamps, blood pressure cuffs, stethoscopes, pulse oximeters

Must be disinfected with a low or intermediate EPA-registered disinfectant after each use; if visibly contaminated with blood, must be cleaned and disinfected with EPA-registered product with label claims for HBV and HIV.

Semi-critical Items (contact with mucous membranes and/or non-intact skin) Examples: Nail clippers, podiatry and dentistry tools, toothbrushes, razors

Must be single use, dedicated to a single person; if used in multiple residents, must receive high-level disinfection or sterilization.

Critical Items (contact with sterile tissue or vascular system)

Examples: Surgical instruments, scalpels, dental scalers

Must be single use (disposable scalpels); high-level disinfection, or sterilization in acute care.





CDC Disinfection and Sterilization Page



Preventing Pressure Ulcers in Hospitals

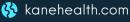
Tools and resources, including skin assessment, Braden Scale, and care plan

Pressure Injuries & Ulcers Staging

NPIAP

A guidance to help staging pressure ulcers **Pressure Ulcer Prevention Bundle**

Risk assessment, skin care, nutrition, repositioning & mobilization, education





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