CHEAT SHEET

WOUND INFECTION

SUMMARY:

Wound infection is the invasion of a wound by proliferating micro-organisms to a level that creates a local, spreading and/or systemic response in the host. Micro-organisms multiply within the wound, developing a range of virulence factors to overcome the host defences leading to local tissue damage and impeding wound healing.

KEY POINTS:

- Diagnosis of wound infection is principally based on the holistic assessment of the patient, the wound and peri-wound tissue and patient responses such as systemic inflammatory response.
- All healthcare professionals involved in assessing and managing patients with wounds must be familiar the risk factors and the signs and symptoms characteristic of infection.
- Registered healthcare professionals should diagnose local wound infection on clinical criteria rather than bacteriological criteria, as most open wounds are colonised by microbial species and yet the progression of healing can often occur in their presence.
- Registered healthcare professionals need to act promptly if an individual with a wound demonstrates signs of spreading or systemic infection. Medical / Surgical teams need to be informed immediately.
- Any suspected infection in a diabetic foot wound needs urgent review by the medical / surgical team and urgent referral sent to the Podiatry Team.
- Any patient identified to have a suspected surgical site infection – especially where there is an underlying surgical implant, must be highlighted to the concerned surgical team for an urgent review to guide the management plan.
- Microbiological investigations should not be undertaken routinely or without substantial cause.

Indications for wound specimen collection for standard microbiological analysis include:

- *spreading or systemic infection*
- *Infected wounds that have failed to respond to antimicrobial intervention or are deteriorating despite appropriate antimicrobial treatment*
- *In compliance with the OUH NHS Foundation Trust MRSA screening guidelines.*
- *Wounds where the presence of certain species would negate a surgical procedure such as beta haemolytic streptococci in wounds prior to skin grafting*
- *In individuals showing signs of sepsis, blood cultures are also indicated, and other likely sites of infection should be considered.*
- In patients with compromised immune competency, such as immunosuppressants, steroids, diabetes, or peripheral arterial disease, consider sampling

FOR FURTHER INFORMATION, CLICK ON LINK:

Taking a wound Swab

Wound Infection Pathway