

FUNGATING WOUND MANAGEMENT

General management:

- Soak dressings or utilise adhesive remover to reduce trauma and anxiety around dressing changes
- Use irrigation or soaks rather than mechanical cleansing to reduce risk of bleeding and pain
- Consider dressings size/ conformability and securement methods— if dressings are being cut to aid application, ensure dressing modality appropriate to be cut
- Caution with use of silver in paediatric patients or patients receiving radiotherapy
- Ensure periwound protection optimised to maintain health of surrounding skin
- Ensure appropriate psychological support given

Bleeding

- Use silicone contact layer to flat wounds or first line hydrofiber to cavity wounds.
- Review patient's coagulation and consider use of Tranexamic acid or Adrenaline soaks to reduce bleeding – discuss with medical/ pharmacy teams.
- Consider use of antimicrobial dressing/ soak if local infection suspected

High exudate levels

- Hydrofiber contact layer
- Second line superabsorbent pad
- Consider use of antimicrobial dressing/ soak if local infection suspected

Malodorous

- Consider if debridement appropriate if devitalised tissue present
- Apply antimicrobial soak at each dressing change
- Consider use of charcoal dressing
- Consider use of antimicrobial dressing if local infection suspected

Pain

- Optimise analgesia administration pre dressing change
- Use atraumatic or non-adhesive dressings – silicone contact layer/ silicone adhesive dressings or tubular retention bandages
- Consider use of antimicrobial dressing if local infection suspected