

Guidelines for Management of Wounds

T TISSUE

Remove non viable; necrotic and sloughy tissue. Viable: i.e. granulation and epithelialisation.

I INFECTION

Increase in serous exudate, friable granulation tissue, bleeds easily, increase in pain at wound site, increase or unusual wound odour, dark red or bright red granulation tissue, delayed wound healing. Treat and manage symptoms of infection.

I INFLAMMATION

Red swelling, heat or evidence of cellulitis.

M MOISTURE IMBALANCE

Manage exudate level
i.e. Is wound too wet or too dry?

E EPITHELIALISING EDGE

Treatment of non-advancing or undermined wound edge (refer to TVN).

Category/Stage of Pressure Ulcer

A pressure ulcer is: localised injury to the skin and/or underlying tissue usually over a bony prominence, as a result of pressure, or pressure in combination with shear. (EPUAP 2009).

1 Category/Stage I:

Non-blanchable redness of intact skin



Intact skin with non-blanchable erythema of a localised area usually over a bony prominence. Discoloration of the skin, warmth, oedema, hardness or pain may also be present. Darkly pigmented skin may not have visible blanching.

2 Category/Stage II:

Partial thickness skin loss or blister



Partial thickness loss of dermis presenting as a shallow open ulcer with a red pink wound bed, without slough. May also present as an intact or open/ruptured serum-filled or sero-sanguinous filled blister.

3 Category/Stage III:

Full Thickness skin loss (fat visible)



Full thickness tissue loss. Subcutaneous fat may be visible but bone, tendon or muscle are not exposed. Some slough may be present. May include undermining and tunnelling.

4 Category/Stage IV:

Full thickness tissue loss (muscle/bone visible)



Full thickness tissue loss with exposed bone, tendon or muscle. Slough or eschar may be present. Often includes undermining and tunnelling.

Which Dressing?

Wound Type	Aim	Recommended Dressing
Epithelialising wound	To protect area and encourage healing	Low Adherent Dressing Vapour-Permeable Dressing Hydrocolloids Foams
Granulating wound	To promote healing by encouraging granulation.	Depending on volume of exudate Hydrocolloid Foam Alginate
Sloughy wounds	To remove sloughy tissue by autolysis and provide a clean base for granulation tissue.	Hydrogel Hydrocolloid Alginate
Necrotic wounds	To remove necrotic tissue by rehydration.	Hydrogel Hydrocolloid Capillary Action Dressing
Cavity Wounds	To Promote Healing and manage exudate	Hydrogel Hydrofibre - rope, packing, ribbon Capillary Action Dressing
Infectious wounds (only if there are clinical signs of infection)	To treat infection and promote wound healing	Cadexomer - Iodine Products Honey Products Silver Dressing (only use if not on antibiotics - MAX 2 weeks)
Malodorous and Fungating wounds	To de-odorise wound and manage infection if present	Metronidazole Gel Deodorising Dressings Honey Products
Leg Ulcers	To correct underlying venous incompetence and promote wound healing	Venous Leg Ulcer (confirmed by Doppler) Compression Bandaging Compression Stocking Arterial Leg Ulcer (confirmed by Doppler) Treat according to individual need

KEY MESSAGES

- ☒ Start at appropriate level of management depending on wound type and stage of healing. Review the wound regularly and prescribe the most suitable dressing as required.
- ☒ It is expected generally that the TYPE of wound and SIZE will change over time; do not prescribe excessive quantities or issue as long term repeats to avoid wastage and facilitate prompt review of wound.
- ☒ To prevent excessive quantities being prescribed, it is recommended that a "dose" is written for each prescribed dressing e.g. Granuflex 10x10cm change every 5-7 days x10.
- ☒ Dressings on FP10 prescriptions should be prescribed for individual patients and not to be used as stock items.
- ☒ *Note that Silver and Honey dressings are not recommended for routine use in chronic venous leg ulcers (SIGN). Also the BNF (62) does not recommended the routine use of silver for uncomplicated ulcers and acute wounds.

Which Product?

Type of Dressing	Product	Size	Cost Per Dressing	Prescribing Points
Alginates	<ul style="list-style-type: none"> ☒ KALTOSTAT ☒ SORBSAN FLAT 	5x5cm 7.5x12cm 10x20cm 5x5cm 10x10cm	0.91 1.99 3.91 0.80 1.68	<ul style="list-style-type: none"> ☒ Medium to heavily exuding wounds. ☒ Do not use on dry wounds. ☒ Easily removed by irrigation. ☒ Cut Kaltostat to size. ☒ Sorbsan can overlap. ☒ Kaltostat is haemostatic & forms a firmer gel. ☒ If having to wet an alginate dressing before use, change to another type of dressing.
Antibacterial & Antimicrobial (Only if there is localised clinical signs of infection)	<ul style="list-style-type: none"> ☒ IODOSORB OINTMENT ☒ IODOFLEX PASTE ☒ ACTIVON TUBE (HONEY) ☒ ACTIVON TULLE (HONEY) ☒ ALGIVON (HONEY) 	10gm 20gm 5g 10g 25gm 5x5cm 10x10cm 5x5cm 10x10	4.29 8.58 3.88 7.76 2.02 1.82 3.06 2.13 3.59	<ul style="list-style-type: none"> ☒ Avoid iodine in those patients with thyroid disorders. ☒ Use for 2 weeks only and review need. ☒ Max. Single application 50g, max. Weekly application 150g; max. duration up to 3 months in any single course treatment. ☒ Useful for application to deep/cavity wounds. ☒ Dressings impregnated with honey are less messy for shallow wounds. ☒ Tulle dressing can be extended out to 5x15, 10x30. ☒ Algivon is an alginate dressing permeated with honey & can hold more exudate (not for dry wounds)
Cavity dressings	<ul style="list-style-type: none"> ☒ AQUACEL RIBBON ☒ ADVADRAW SPIRAL ☒ ADVADRAW 	2cmx45cm 0.5x40cm 10x10cm 10x15cm	4.54 0.82 0.88 1.19	<ul style="list-style-type: none"> ☒ Hydrofibre ribbons for sinuses with visible base - do not pack too tightly. For larger area use Aquacel Hydrofibre sheets. ☒ Do not use on arterial bleeds, heavily bleeding wounds and vascular fungating tumours.
Compression bandaging	<ul style="list-style-type: none"> ☒ ACTICO- Short stretch cohesive compression bandage ☒ TENSOPRESS - High compression ☒ K-TWO SYSTEM ☒ PROFORE KIT #1,#2,#3,#4 	8cmx5m 10cmx5m 12cmx5m 7.5cmx3.5m 10cmx3.5m 18-25cm 25-32cm 18-25cm 25-30cm	3.09 3.21 4.01 2.60 3.35 7.32 7.96 9.70 5.70	<ul style="list-style-type: none"> ☒ Confirm Doppler reading first. ☒ Short stretch for patients unable to tolerate 3 or 4 layer compression. Usually to reduce odema. ☒ Choose sizes for 2 and 4 layer systems depending on ankle sizes. ☒ Application technique is more important in achieving healing than the bandage type.
Foams	<ul style="list-style-type: none"> ☒ ALLEVYN-NON ADHESIVE ☒ ALLEVYN-ADHESIVE ☒ ALLEVYN GENTLE BORDER ☒ TEGADERM FOAM - ADHESIVE 	5x5cm 10x10cm 10x10cm 12.5x12.5cm 10x10cm 15x15cm 10x11cm	1.41 2.40 2.10 2.57 2.10 3.82 2.33	<ul style="list-style-type: none"> ☒ For light to moderately exuding wounds. ☒ Provide mechanical and thermal insulation. ☒ Secure non adhesive dressings with adhesive tape at edges only ☒ Do not cover foams with occlusive dressing. ☒ Allevyn Gentle Border for patients with frail and sensitive skin that is liable to tear. ☒ Tegaderm Adhesive to be stretched at corners when removed.
Hydrocolloids	<ul style="list-style-type: none"> ☒ DUODERM - EXTRA THIN ☒ GRANUFLEX ☒ TEGADERM HYDROCOLLOID 	10x10cm 15x15cm 7.5x7.5cm 10x10cm 15x15cm 10x10cm 15x15cm	2.68 5.09 0.76 1.27 2.73 2.30 4.46	<ul style="list-style-type: none"> ☒ Allow 2.5cm over wound edge. ☒ Granuflex – may smell when dressing is being removed. ☒ Can be warmed before use to make more malleable. ☒ Provides pain relief and no pain at dressing change. ☒ Waterproof dressings except Aquacel. ☒ Can be left in place for up to 5 days. ☒ Tegaderm Hydrocolloid has an adhesive film backing so there is no need for secondary adhesive dressing.
Hydrofibre	<ul style="list-style-type: none"> ☒ AQUACEL 	10x10cm 15x15cm	2.33 4.38	<ul style="list-style-type: none"> ☒ Aquacel- for moderate to highly exuding wounds. ☒ Cover with a moisture retaining dressing.
Hydrogels	<ul style="list-style-type: none"> ☒ INTRASITE GEL- with applicator ☒ PURILON - alginate hydrogel ☒ INTRASITE CONFORMABLE- sheet 	8g 15g 8g 15g 10x10cm (7.5g) 10x20cm (15g)	1.72 2.32 1.67 2.18 1.73 2.34	<ul style="list-style-type: none"> ☒ Suitable for most types of wounds except ischaemic and diabetic feet, infected and heavily exuding wounds. ☒ Provides pain relief and no pain at dressing change. ☒ Purilon more absorbent and safe to use prior to larval therapy. ☒ Purilon can be used for heavily exuding wounds. ☒ Hydrogel sheets- for shallow wounds and where gels may be difficult to keep in place.
Irrigating Solutions	<ul style="list-style-type: none"> ☒ TAP WATER ☒ IRRIPOD 	25x20ml	Free 5.66	<ul style="list-style-type: none"> ☒ Tap water is preferred to soak leg ulcers and irrigate clean wounds.

Which Product?

Type of Dressing	Product	Size	Cost Per Dressing	Prescribing Points
Low Adherent Dressings	<ul style="list-style-type: none"> NA ULTRA-Contact dressing ADAPTIC TOUCH (SILICONE DRESSING) 	9.5x9.5cm 19x9.5cm 7.6x11cm 12x15cm	0.33 0.63 2.25 4.65	<ul style="list-style-type: none"> N-A ultra is a silicone coated dressing. For use as primary dressing under compression bandaging. For use as secondary dressing for hydrogels. Adaptic Silicone dressing should only be used for those with very fragile skin that are likely to tear easily.
Malodorous wound Dressings	<ul style="list-style-type: none"> ANABACT (Metronidazole gel 0.75%) 	15g 30g	4.47 7.89	<ul style="list-style-type: none"> Apply 1-2 times daily to clean wound. Cover with non adherent dressing. Anabact contains parabens. Avoid exposure to strong sunlight or UV light.
Moisturisers	<ul style="list-style-type: none"> HYDROMOL OINTMENT HYDROMOL BATH & SHOWER EMOLLIENT DERMOL 600 BATH EMMOLLIENT 	500g 500ml 600ml	4.82 4.11 7.55	<ul style="list-style-type: none"> For soaking and washing leg ulcers. Dermol -To soak and wash infected legs for a limited time of 6weeks. Then revert to Hydromol Emollient if needed.
Odour Absorbing Dressing	<ul style="list-style-type: none"> CARBOPAD VC. CLINISORB 	10x10cm 10x20cm 10x10cm 10x20cm	1.59 2.15 1.81 2.41	<ul style="list-style-type: none"> Carbopad cannot be cut to size. Clinisorb can be cut to size.
Paste Bandages	<ul style="list-style-type: none"> ICTHOPASTE VISCOPASTE 	7.5cmx6m 7.5cmx6m	3.53 3.56	<ul style="list-style-type: none"> PATCH TEST before use as patients may be sensitive to preservatives and fatty alcohols in paste. Do not use for cavity wounds.
Retention Bandages	<ul style="list-style-type: none"> K- BAND ACTIFAST OR CLINIFAST-TUBULARLARGE LIMB-BLUE TRUNKS(CHILD)-YELLOW 	10cmx4m 7.5cmx3m 7.5 x 5m 10.75cmx3m 10.75cmx5m	0.27 2.13 3.74 3.49 6.04	<ul style="list-style-type: none"> Do not use Tubigrip or Crepe as retention bandage. For tubular bandages 5m and 3m lengths are less wasteful than 1m and can accommodate various limb sizes. Consider if blue (7.5cm) line size will suffice before prescribing a yellow (10cm) line bandage. 6m per month should be enough for most patients.
Silver Dressings	<ul style="list-style-type: none"> SILVERCEL NA AQUACEL AG RIBBON 	11x11cm 10x20cm 1cm 2cm	3.89 7.25 2.97 4.54	<ul style="list-style-type: none"> Alginate silver dressing for moderate to heavily exuding wounds. Aquacel Ag ribbon For cavity wounds. Maximum of 2 weeks use, so it is expected that not more than 5 silver dressings will be needed.
Skin Protection	<ul style="list-style-type: none"> CAVILON DURABLE BARRIER CREAM CAVILON NON STING BARRIER FILM 	28g Tube 92g Tube 1ml Applicator 28ml Spray	3.92 7.99 0.98 6.54	<ul style="list-style-type: none"> Durable Barrier Cream to be used on intact skin. Non Sting Barrier Film to be used on Broken skin. To be used to protect skin from bodily fluids, which can cause skin damage.
Sterile Dressing Packs	<ul style="list-style-type: none"> NURSE-IT WOUNDCARE STERILE PACK 	S/M/L/XL S/M/L	0.52 0.44	<ul style="list-style-type: none"> Contains apron, paper sterile field, gloves, swabs, forceps, paper towel, disposable bag and compartment tray.
Support Bandages	<ul style="list-style-type: none"> K - LITE (crepe) 	10cm	0.97	<ul style="list-style-type: none"> Not for compression or reducing oedema. Generally 6 bandages maximum should be enough for most patients.
Surgical Adhesive Tapes	<ul style="list-style-type: none"> SCANPOR TAPE HYPAFIX 	2.5cm 5cm 5cm x10m 10cm x 10m	0.66 1.14 2.56 4.46	<ul style="list-style-type: none"> For use in securing dressings. Some patients are allergic to adhesive tapes. Hypafix is more suited for securing dressings, catheters and drainage tubes in position where contact to the skin is needed. it is useful for securing dressings in awkward body parts.
Topical Negative Pressure	<ul style="list-style-type: none"> V.A.C. GRANUFOAM DRESSING KIT V.A.C. FREEDOM CANISTER WITH GEL ACTI-VAC CANISTER WITH GEL 	Small Medium 300ml 300ml	22.11 23.33 27.58 27.38	<ul style="list-style-type: none"> Community nurses to use only if recommended by Tissue Viability Nurses (TVNs) or referred from hospital. Order 5 at a time for kits and canisters. Reassess after 1 month. Not for repeat prescribing.
Vapour Permeable Dressings	<ul style="list-style-type: none"> TEGADERM 	12cm x12cm 15x20cm	1.09 2.37	<ul style="list-style-type: none"> Stretch opposite corners for easy removal. For clean superficial wounds. Can be left in place up to 7 days. Prevention of pressure ulcers.

Which Product?

Type of Dressing	Product	Size	Cost Per Dressing	Prescribing Points
Absorbent or Surgical Pads	<input checked="" type="checkbox"/> ZETUVIT E NON - STERILE PADS	20x20cm	0.14	<input checked="" type="checkbox"/> Non-sterile pads should be used in most cases. <input checked="" type="checkbox"/> Kerramax only to be used on highly exuding wounds.
	<input checked="" type="checkbox"/> XUPAD STERILE PADS	20x40cm	0.26	
		20x20cm	0.28	
		20x40cm	0.40	
	<input checked="" type="checkbox"/> KERRAMAX SUPERABSORBER	20x22cm	2.12	
		30x20cm	2.43	

**Costs are based on Drug Tariff January 2012 and MIMS Feb 2012.

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