

Section 9: Post-operative Wounds

Surgical site infection (SSI) is one of the most common types of healthcare associated infection (HAI), estimated to account for 18.6% of inpatient HAI within NHS Scotland. SSI cause excess morbidity and mortality and are estimated on average to double the cost of treatment, mainly due to the resultant increase in length of stay. SSI can have serious consequences for patients affected as they can result in increased pain, social disruption and in some cases require additional surgical intervention¹.

Surgical Specialty	Type of Surgery	Dressing Options			Other Considerations	References
		Theatre	Ward	Post-discharge		
Orthopaedics	Total hip replacement Total knee replacement	Aquacel surgical Leave in place for 7 days	Aquacel surgical should only be changed within 7 days if saturated. Wound should be assessed to determine if further dressing is required. Aquacel Extra & Duoderm extra thin If exudate is high Opsite Post-op If exudate is low	Wound should be assessed to determine if further dressing is required. Aquacel Extra & Duoderm extra thin If exudate is high Contact Orthopaedics for advice Opsite Post-op If exudate is low	Aquacel surgical · to be applied in theatre only · can be left in place for up to 7 days · to remove dressing, press down on the skin with one hand and carefully lift an edge of the dressing with your other hand. Stretch the dressing to break the adhesive seal and remove.	1 Healthcare Associated Infection Annual Report 2013. Health Improvement Scotland. May 2014. 2 www.worldwidewounds.com 3 Burke NG, Green C, McHugh G, McGolderick N, Kilcoyne C, Kenny P. A prospective randomised study comparing the Jubilee dressing method to a standard adhesive dressing for total hip and knee replacements. Journal of Tissue Viability. 2012; 21(3): 84-7. 5 NICE Clinical Guideline 74. surgical site infection: Prevention and treatment of surgical site infection. NICE: October 2008.

Post-operative wound management advice from other specialties to be added as agreed.

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