

Preventing surgical site infections



Patient who needs a surgical procedure

Clinical area Ward

Preoperative Ensure that:

- a clinical risk assessment for meticillin resistant *Staphylococcus aureus* (MRSA) screening is undertaken
- hair is not removed if at all possible; if hair removal is necessary, do not use razors
- the patient has showered (or bathed/washed if unable to shower) on day of or day before surgery using soap

Postoperative

- the wound dressing is kept in place for 48 hours after surgery unless clinically indicated
- aseptic technique is used, if there is excess wound leakage and need for a dressing change
- hand hygiene is performed immediately before every aseptic dressing change (WHO Moment 2)

Clinical area Theatre

Preoperative Ensure that:

- prophylactic antibiotic is prescribed as per local antibiotic policy/SIGN guideline, for the specific operation category
- the antibiotic is administered within 60 minutes prior to the operation (blade to skin)

Perioperative

- 2% chlorhexidine gluconate in 70% isopropyl alcohol solution is used for skin preparation (if patient sensitive, use povidone-iodine)*
- the patient's body temperature is maintained above 36°C in the perioperative period (excludes cardiac patients)
- the diabetic patients glucose level is kept at <1 I mmol/I throughout the operation
- the patient's haemoglobin saturation is maintained above 95% (or as high as possible if there is underlying respiratory insufficiency)
- the wound is covered with a sterile wound dressing at the end of surgery

Practice points

The use of personal protective equipment (PPE) including gloves is important in all procedures where blood and body fluid risk exists.

The featured recommendation on hand hygiene does not detract from other times when hand hygiene is recommended and will be monitored against (namely the 5 Moments for Hand Hygiene). The featured recommendations do not aim to cover emergency situations, which require clinical judgement for patient care actions.

For further information on the background to these recommendations and the literature reviews that informed these please visit http://www.hps.scot.nhs.uk as well as referring to your local teams and policies.

Also see NHS Education for Scotland http://www.nes.scot.nhs.uk and Healthcare Improvement Scotland http://www.healthcareimprovementscotland.org/home.aspx for additional information on education and patient safety improvement. Also refer to the Standard Infection Control Precautions Section of the National Infection Prevention and Control Manual http://www.hps.scot. nhs.uk/haiic/ic/nationalinfectionpreventionandcontrolmanual.aspx.

February 2015

*All medical and nursing staff involved in the use of all medical devices and medicinal products containing chlorhexidine should be aware of the risk of an anaphylactic reaction due to chlorhexidine allergy. The full details of the alert are available from the following weblink⁷⁴ http://www.mhra.gov.uk/Publications/Safetywarnings/MedicalDeviceAlerts/CON197918