

English

If you need information in another way like easy read or a different language please let us know.

If you need an interpreter or assistance please let us know.

Lithuanian

Jeigu norėtumėte, kad informacija jums būtų pateikta kitu būdu, pavyzdžiui, supaprastinta forma ar kita kalba, prašome mums apie tai pranešti.

Jeigu jums reikia vertėjo ar kitos pagalbos, prašome mums apie tai pranešti.

Polish

Jeżeli chcieliby Państwo otrzymać te informacje w innej postaci, na przykład w wersji łatwej do czytania lub w innym języku, prosimy powiedzieć nam o tym.

Prosimy poinformować nas również, jeżeli potrzebowaliby Państwo usługi tłumaczenia ustnego lub innej pomocy.

Punjabi

ਜੇ ਤੁਹਾਨੂੰ ਇਹ ਜਾਣਕਾਰੀ ਕਿਸੇ ਹੋਰ ਰੂਪ ਵਿਚ, ਜਿਵੇਂ ਪੜ੍ਹਨ ਵਿਚ ਆਸਾਨ ਰੂਪ ਜਾਂ ਕਿਸੇ ਦੂਜੀ ਭਾਸ਼ਾ ਵਿਚ, ਚਾਹੀਦੀ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

ਜੇ ਤੁਹਾਨੂੰ ਦੁਭਾਸ਼ੀਏ ਦੀ ਜਾਂ ਸਹਾਇਤਾ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਸਾਨੂੰ ਦੱਸੋ।

Romanian

Dacă aveți nevoie de informații în alt format, ca de exemplu caractere ușor de citit sau altă limbă, vă rugăm să ne informați.

Dacă aveți nevoie de un interpret sau de asistență, vă rugăm să ne informați.

Traditional Chinese

如果您需要以其他方式了解信息，如易读或其他语种，请告诉我们。

如果您需要口译人员或帮助，请告诉我们。

Wound Care Guide Cardiac Surgery.

Cardiothoracic Ward



The prevention of infection is a major priority in all healthcare and everyone has a part to play.

- Wash your hands with soap and warm water and dry thoroughly. Use hand gel, if provided, in care facilities.
- If you have symptoms of diarrhoea and vomiting stay at home and do not visit relatives that are vulnerable in hospital or in residential care. You will spread the illness.
- Keep the environment clean and safe. Let's work together to keep it that way. Prevention is better than cure.

This wound care guide has been developed by your Cardiothoracic Team using the best evidence based practice to minimise your risk of surgical site infection post operatively.

Pre-op

Surgical wound care has many factors and begins before the wound is even made. All patients pre-operatively will be screened for **MRSA** and **MSSA** bacteria. These micro-organisms (germs) are proven to increase the risk of wound infections post-op. This risk is significantly reduced with treatment such as Chlorhexidine Wash and Bactroban or Naseptin Nose Cream. If your screen is positive, you will be asked to complete a minimum of 5 days treatment before your surgery.

Cleanliness is important for all patients pre-op. Please try to shower daily in the weeks leading up to your surgery.

Email Us!

rwh-tr.cardiacssiwound@nhs.net

We are piloting a new and exciting way for you to contact us regarding your wounds!

Our aim is for you to use this email address to send us photos of your wounds and symptoms you may be getting. Our aim is to catch any signs of wound infections as early as possible.

If you are unsure, ask!

Please call our wound clinic for advice.

Opening times:

09:00 - 16:00 Monday - Thursday

09:00 - 12:00 Friday

Alternatively there is always someone available to assist and give advice on the ward.

Contact Details:

Cardiothoracic Ward (CTW) B8: 01902 69 4306 / 4307

Wound Clinic: 01902 69 4605 / 6722

Cardiac Rehab: 01902 69 4226

www.royalwolverhampton.nhs.uk

Wound Care

Providing your wound is healing well on discharge, you will be discharged without a dressing on.

It is important not to rub any products into your wound after surgery. This includes in the shower; let the water run over your wound but do not use soap on it. Pat the wound dry with a clean towel.

Submission into water such as swimming or a bath is strongly discouraged for the first six weeks post-op.

It is important to have clean hands when touching your wounds and we recommend the use of alcohol based hand gel.

Please do not pick or scratch your wound - scabs are your bodies natural defence and removing these will introduce bacteria that can cause infection.

If your wound is not perfectly dry and healing on discharge you may be discharged with a dressing in place and referred to our unique wound clinic for further out-patient management.

During your stay

On admission, you will be assessed to help us tailor your care based on recognised risk factors for surgical site infection such as weight, diabetes etc. This helps us ensure you receive the correct pathway for your risk group.

All risk categories (Low, Medium and High) have a wound care pathway tailored to your needs.

The aim of all pathways is to significantly reduce your risk of wound infection post-op.

In order to prepare for surgery, the nurses will shave the required areas with surgical clippers as close to surgery as possible. Please do not attempt to do this yourself as this can increase infection risk.

Post-op

Your main wounds will be closed with dissolvable sutures that will not need to be removed post-op. However you will also have 2 or 3 drain sutures, these will need to be re-moved by your practice nurse 7 days post drain removal.

All dressings will be placed immediately after the operation and will remain in place for four days or removed on the day of discharge.

Prior to discharge you will be asked if you consent to a photo being taken of your sternal wound. This photo is to compare your wound appearance in days to come.

You will be given a copy of this picture before discharge or have one sent out to you by post. This photo will also be uploaded to our hospital system for our reference.

Pain

It is perfectly normal to experience pain from your wounds for some weeks following surgery. You may also experience pains and stiffness around your neck, chest, shoulders and back.

Continue to take pain relief for as long as necessary to keep your pain under control.

Sternum and Wound Support

There are reasons for wound breakdown that are not due to infection. Protection of your sternum post-op is vital for your recovery. It is important to reduce the amount of weight put through your arms and chest. Particular attention should be paid when moving around the bed or on standing from a chair. You must refrain from carrying heavy objects until after you are reviewed at your 6 week clinic.

When coughing, remember to support your chest with your arms, as taught in hospital.

To reduce this risk you may be asked to wear a post-thorax jacket. The jacket acts as a plaster cast would on a broken bone. If your medical team identifies that this would be beneficial for you, this jacket must be worn at all times until your six week follow up appointment. The post-thorax jacket must be washed and tumble-dried at no more than 70 Degrees Celsius.

We advise all our female patients to wear a soft, non-underwired bra to prevent the weight of the breasts pulling the wound apart.

Post Discharge

Please use the photo given to you when you are at home as a comparison to identify any changes in your wound.

Note any new:

- Redness
- Pain
- Swelling
- Increase in temperature
- Oozing
- Pus
- Clicking or movement in the sternum

All of the above can be a sign of a wound infection and you must seek advice from the ward if any of these symptoms occur.

As explained previously, we will also have a copy of your photo on our system so we can also compare.

This process will ensure the correct treatment for your wound and will prevent the prescribing of unnecessary antibiotic therapy.

Wound Clinic

Our nurse-led wound clinic is based in cardiac outpatients B3. You will be referred by your nurse on discharge and will be contacted directly with an appointment slot. Please DO NOT just turn up.