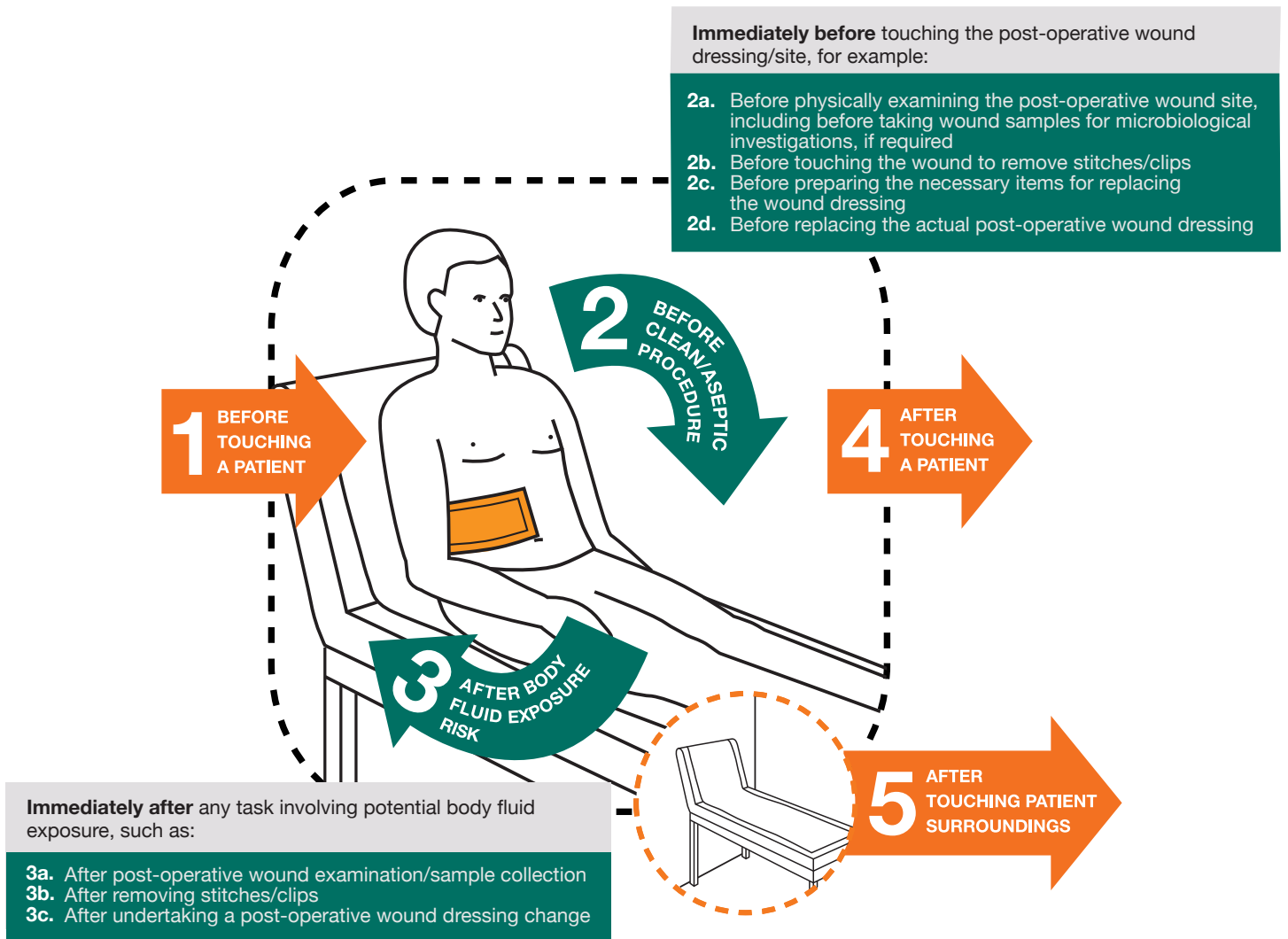


My 5 Moments for Hand Hygiene

Focus on caring for a patient with a post-operative wound



Key additional considerations for post-operative wounds

- Avoid unnecessary touching of the post-operative wound site, including by the patient.
- Wear gloves if contact with body fluids is anticipated; the need for hand hygiene does not change even if gloves are worn, as per the WHO 5 Moments.
- Follow local procedures regarding use of aseptic non-touch technique for any required dressing changes/wound procedures.
- Don't touch dressings for at least 48 hours after surgery, unless leakage or other complications occur.
- Routine post-operative wound dressings should be basic dressing types (e.g. absorbent or low adherence dressings).
- When approaching a patient for the examination of a wound, the health worker may also perform other tasks (e.g. accessing a venous catheter, drawing blood samples, checking urinary catheter). Hand hygiene may be needed before and after these specific tasks, to once again fulfill Moments 2 and 3, for example (refer to WHO dedicated 5 Moments posters for line or catheter management).
- When indicated, pre-operative surgical antibiotic prophylaxis (SAP) should be administered as a single parenteral dose 2 hours or less before the surgical incision, while considering the half-life of the antibiotic. Do not prolong administration of SAP after completion of the operation.
- Antibiotic therapy for any proven surgical site infection should ideally be administered based on wound sample culture and sensitivity results.
- Common signs and symptoms of wound infection are: pain or tenderness; localized swelling; erythema; heat, or purulent drainage from the superficial incision.
- This guidance does not include information on *complicated* post-operative wound care, when specific treatments or therapies may be required.