

Hygiene and wound care for patients having surgery





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This leaflet explains how to care for your wounds after heart and lung surgery. It does not replace personal advice from a healthcare professional. Please ask your nurse or surgical team if you have any questions.

Why is hygiene and wound care important?

Our skin protects us from bacteria (germs) and infection. During surgery, the skin is cut and the risk of infection increases. Good hygiene and wound care reduce the risk of your surgical wounds becoming infected.

Surgical wounds

Before your surgery, your surgeon will explain where he/she will cut the skin. The cuts are called surgical wounds. The size and location of your wounds depends on your type of surgery. For most operations, you will have one main surgical wound.

As well as surgical wounds, you may have a small wound in your hand, arm or groin, where a cannula goes in to a vein. A cannula is the thin, plastic needle that is used for fluids and medications during and after surgery.

Body hair

Do not shave or remove hair from your chest, arms, legs or groin for seven days before you come in to hospital. Shaving can damage the skin and increase the risk of infection.


When you come in to hospital, nurses will help you prepare your skin for your operation.

Personal hygiene

You do not need to bring your own soap, towels or gown in to hospital. When you arrive, we will give you:

- liquid antimicrobial soap



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- clean, disposable towels and flannels
 - a clean gown
 - clean linen on your bed

We provide disposable flannels and towels because bacteria can grow quickly on a damp, re-usable flannel, especially when left in a toilet bag.

The night before your operation (at home or in hospital)

It is important to wash thoroughly with liquid antimicrobial soap to reduce the risk of infection. It is also important to use clean towels and flannels.

A nurse will give you a liquid antimicrobial soap at the pre-admission clinic, or in hospital. Antimicrobial soap kills bacteria on your skin.

If you were given antimicrobial soap at your pre-admission clinic:

- use about a quarter of the soap the night before your operation
- bring the rest of the soap in to hospital, to use later.

How to wash thoroughly

If possible, have a shower rather than a bath, when washing in preparation for your surgery. Running water helps get rid of the bacteria on your skin.

Wet your skin, and put lots of antimicrobial soap on the flannel. Wash your skin firmly with the flannel. Remember to wash well under skin folds, such as breasts and groin. Leave the soap on for one minute before rinsing. Rinse your skin under running water to get rid of all the soap.

If you don't have a shower, stand in the bath to soap yourself and use a jug of clean water to wash off the soap.

Dry your skin well, with clean towels. Dry your chest first, then dry the rest of your body.

If you are in hospital, your nurse can help you. Your nurse will also give you clean towels and flannels.

The morning of your operation (in hospital)

Washing

Have a shower, as described above, using antimicrobial soap. Your nurse will help you if necessary.

Body hair

Heart operation patients usually need to remove some body hair using disposable clippers, which your nurse will give you. You can clip your own hair, or your nurse can help you. Lung operation patients usually do not need to remove any body hair. The nurse will check you are fully prepared before you go to theatre.

After your operation

A nurse will cover each wound with a dressing. The medical and nursing staff will check your dressings every day. Following heart surgery, your wound will usually be covered with a dressing while you are in hospital with us. After lung surgery, a dressing will cover the wound for the first day or two but all wounds will be assessed and managed on an individual basis.

The dressings are waterproof, so you can have a shower but avoid placing the jet of water directly on the wounds and make sure it is not too hot. If water does get under the dressing, let your nurse know as it will need changing.



Washing

Have a shower or help with washing every day to get rid of bacteria on your skin. Your nurse can help, if needed.

Use clean towels every time you have a shower. After your shower, put your towels in the bathroom linen skips, or give them to a nurse.

If you have a chest drain, your nurse will explain how to have a shower.

Washing your hands

Washing your hands gets rid of bacteria and helps stop infection. Wash your hands thoroughly and regularly, especially before eating and after using the toilet.

Do not touch your cannula or wounds, as bacteria can move from your hands to your wounds.

Do not let anyone touch your cannula or wounds, unless they have washed their hands with soap and water, or alcohol hand gel (available in the clinical areas).

Antibiotics

Your doctor may prescribe antibiotics to prevent an infection.

Female patients

It is normal for your body to hold some fluid after an operation. A bra will give your wound important support.

If you're having a heart operation, please bring at least two soft, front-fastening non-wired bras (see page 7 for more information).

If you're having a lung operation, depending on the type of surgery, you may be asked to bring in two soft, non-wired cotton bras.

Bras for female heart patients

We recommend heart patients wear BHIS cardiothoracic support bras. These front-fastening bras are designed for patients who have a chest wound following heart surgery.

You can order BHIS bras online in a range of sizes at www.cuiwear.com or www.bhisbra.co.uk.



Large department stores also stock front fastening bras. If you have any questions or concerns, speak to the pre-admission clinic team. Please note that in addition to the bras you bring to hospital, you will be given a BHIS bra in theatre.

Front-fastening bras are better because the lower front hooks can be left open, to stop rubbing on the wound. The bra will still be able to support the wound with the lower fasteners of the bra open. Unfastened lower hooks may be more comfortable when sitting.

If a bra fits well, you should be able to get two fingers to fit comfortably under your bra band. The band should not dig into your skin.

If you are wearing a BHIS bra, the label should be worn on the outside (see picture above) when you are in hospital. This is so we can see the size details in case you need to be given a different sized-bra.

You will need to wear a bra during the day and at night for about four to six weeks after your operation.



Leaving hospital

Before you leave hospital, a nurse will take off your dressings and check your wounds. If your wounds are healing well, the nurse will leave them uncovered.

If you still need a dressing, the nurse will ask your district nurse or practice nurse to remove your dressings when you get home.

Remember: do not touch your wounds as bacteria can spread from your hands to your wounds.

At home

Wash every day, using liquid or antimicrobial liquid soap. Use warm water, and avoid high temperatures.

It is safe to get your wounds wet under running water, but avoid soaking your wounds in the water jet of a shower.

Wash your wounds gently. It is okay if you get soap on your wounds, but do not put soap directly on to your wounds for eight weeks after your operation until your wounds have healed completely.

Bath or shower?

We recommend having a shower, because:

- running water is better for your wounds than bath water
- getting out of a shower is easier and safer – getting out of a bath puts strain on your chest muscles.

Wash with a liquid soap or antimicrobial liquid soap and water. Avoid getting soap directly on your wounds, and rinse with clean tap water.

If you do not have access to a shower, please ask your nurse for advice on how to strip wash during your recovery period.

Drying your wounds

Gently pat your wounds dry with a towel. Always use clean, dry towels. Do not rub the wounds.

Dry the wounds above your waist first, then dry the rest of the body above the waist.

Now use a different towel to dry below your waist. Dry your wounds, then dry the rest of the body below your waist.

Do not share your towels with anyone else.

Checking your wounds


Check your wounds every day to make sure they are healing well. Look out for changes that may need treatment.

Please contact your GP or surgical team immediately if you have any of these symptoms:

- a wound looks red or angry
- new or increasing redness around a wound
- more pain from a wound
- pus or more fluid leaking from a wound
- an unpleasant smell from a wound
- any new opening of a wound
- unexplained fever
- if you hear a 'clicking' sound from your chest (this needs to be checked to make sure your chest bone is stable and not moving).

Wound photographs

Your nurse may take a photograph of your chest wound for you to take home. You can compare your wound with the photo to check for any changes.



The photo helps you notice changes, so you can get treatment quickly, if needed.

“I found the discharge photo and accompanying instructions invaluable. Thank you so much!”

Heather

Treatment after hospital

If your GP is treating your wounds, but the wounds do not get visibly better after one week, please telephone your surgical team or ward (see page 11). Heart surgery is considered ‘implant surgery’ because of the wires used in the chest. These can make treating infection more difficult. For this reason, it is important that you contact us as soon as possible if you have any concerns about your wounds.

Travelling

If you travel as a passenger in a car, put padding between your clothes and the seatbelt for the first two weeks. The padding will help stop rubbing against your chest wound.

Patient videos

Watch our patient videos on how to stop your wound getting infected after you have had surgery:

- Reducing the risk of infection
- What causes wound infection?
- Surgical wound healing

See the videos here: www.rbht.nhs.uk/patients-visitors/patients/infection-prevention/preventing-wound-infection

You can also see a video about BHIS cardiothoracic support bra on our website: www.rbht.nhs.uk/bhism-bra

More information

If you have any questions, please contact your GP or practice nurse. You can also contact the ward staff or your surgical team.

Royal Brompton Hospital switchboard 0330 12 88121

Princess Alexandra ward	020 7351 8516
Elizabeth ward	020 7351 8595
Sir Reginald Wilson ward	020 7351 8483
Paul Wood ward	020 7351 8598
York ward	020 7351 8592

Cardiac liaison nurse – Royal Brompton Hospital

Contact the hospital switchboard on **0330 12 88121** and ask for the operator, then ask the operator to connect you to the cardiac liaison nurse on call.

Harefield Hospital switchboard 0330 12 88121

Cedar ward	01895 828 525
Maple ward	01895 828 552

If you have concerns about any aspect of the service you have received in hospital and feel unable to talk to those people responsible for your care, call PALS on:

- Royal Brompton Hospital – 020 7349 7715
- Harefield Hospital – 01895 826 572

You can also email pals@rbht.nhs.uk. This is a confidential service.

Royal Brompton Hospital
Sydney Street
London
SW3 6NP
Tel: 0330 12 88121

Harefield Hospital
Hill End Road
Harefield
Middlesex
UB9 6JH
Tel: 0330 12 88121

Website: www.rbht.nhs.uk

Royal Brompton and Harefield hospitals are part of Guy's and St Thomas' NHS Foundation Trust

إذا كنت ترغب في الحصول على ترجمة فورية لمضمون هذه الوثيقة إلى اللغة العربية، يرجى منك الاتصال بأحد مستخدمينا بجناح المصلحة التي يتم فيها استشفائك. أحد موظفينا سيسعى لترتيب إجراءات الترجمة وإتمامها في الوقت المناسب لك.

Brosurteki bilginin Türkçe tercemesi için tedavi görüyor olduğunuz bölüme bas vurunuz. Bölüm personeli tercemenin gerçekleşmesini en kısa zamanda ayarlayacaktır.

