



<p>Team Name: Wound Care</p> <p>Team Lead: Regional Director - Staff Development, Infection Prevention & Control/Director Home Care, Palliative Care & Seniors</p> <p>Approved by: Regional Lead – Acute Care & Chief Nursing Officer</p>	<p>Reference Number: CLI.4110.SG.011</p> <p>Program Area: Across All Care Areas</p> <p>Policy Section: General</p>
<p>Issue Date: May 31 2021</p> <p>Review Date:</p> <p>Revision Date:</p>	<p>Subject: Silver Nitrate (agNo3) Sticks for Wound Care</p>

Use of pre-printed documents: Users are to refer to the electronic version of this document located on the Southern Health-Santé Sud Health Provider Site to ensure the most current document is consulted.

STANDARD GUIDELINE SUBJECT:

Silver Nitrate (agNo3) Sticks for Wound Care

PURPOSE:

Silver Nitrate is an effective cautery agent. Indications for use include:

- Removal of hypergranulation tissue after other methods have been trialled to address hypergranulation and have not succeeded i.e. appropriate moisture management or antimicrobials.
- To open rolled wound edges.

DEFINITIONS:

Advanced Wound Care Clinician: a healthcare professional who has completed competency preparation from a recognized wound care program. These include:

- Enterstomal Therapy through the Canadian Association of Enterstomal Therapist (CAET) or Wound Ostomy Continence Nurse (WCON).
- University affiliated advanced wound care education programs (e.g. the International Interprofessional Wound Care Course [IIWCC] from the University of Toronto; the Grant MacEwan University Certificate in Wound Management; and Masters of Clinical Sciences in Wound Healing).

Authorized Prescriber(s): healthcare professional(s) with prescriptive privileges defined by the Provincial and Federal legislation, Regulated Health Professions Act (RHPA), their respective regulatory college or association, and Southern Health-Santé Sud (SHSS).

Hypergranulation: Hypergranulation tissue is also known as over granulation, tissue or proud flesh, and presents as friable, red, sometimes shiny and soft appearance that is above the level of the surrounding skin. Hypergranulation physically impedes epithelial cell movement, and the wound generally will not heal when there is hypergranulation tissue because it will be difficult for epithelial tissue to migrate across the surface of the wound and contraction will be halted at the edge of the wound.



Hypergranulation

Rolled Wound Edge: The final stage of wound healing is epithelialization, which is the active division, migration, and maturation of epidermal cells from the wound margin across the open wound bed. Healthy wound edges or margins present as advancing pink epithelium growing over mature granulated tissue. The edge of the wound includes the peri-wound skin 2-4cm from wound edge.

IMPORTANT POINTS TO CONSIDER:

- Contraindicated for use if client has a sensitivity or allergy to silver.
- Excess silver nitrate can be neutralized with 0.9% saline then washed away with water (tap or sterile).
- Silver Nitrate is applied by a Registered Nurse/Licensed Practical Nurse/Occupational Therapist/Physio Therapist. Clinicians must have reviewed the procedure and be able to identify tissue that is hypergranulated or has rolled edge to support the application of silver nitrate.
- If unable to confirm hypergranulation/rolled wound edge, contact a wound care clinician.

PROCEDURE:

1. Authorized prescriber or Advanced Wound Care Clinician order is required prior to perform silver nitrate treatment.
2. Review client file for documentation and consult with a Primary Care Provider /Nurse Practitioner and/or Advanced Wound Clinician prior to use.
3. Verify client identity using 2 client identifiers.

4. Perform hand hygiene before initial contact with client or client environment.
5. Confirm hypergranulation is present.
6. Explain procedure and expected outcomes to client.
7. Perform hand hygiene.
8. Position client in a comfortable position so only the affected area is exposed.
9. Don gloves.
10. Remove soiled dressing.
11. Note type and amount of wound drainage on used dressing.
12. Inspect wound for odor, color, drainage, peri-wound skin integrity and measure wound weekly.
13. Remove gloves.
14. Perform hand hygiene.
15. Open and prepare supplies.
16. Don gloves.
17. Cleanse wound with normal saline or other appropriate cleansing agent. Dry and protect peri-wound skin. This protects intact skin from chemical damage.
18. Moisten the tip of one silver nitrate stick with sterile water or tap water. This will activate the silver nitrate. **Do NOT** use normal saline to moisten the tip as this will decrease the effectiveness of the silver nitrate.
19. Gently roll the silver nitrate stick on the hypergranulation tissue or rolled wound edge. **Do NOT** touch the peri-wound skin. Note: The newly burnt skin tissue will appear a grayish color.
20. Apply the appropriate wound dressing. The dressing should keep the area dry to discourage the regrowth of the hypergranulation tissue.
21. Repeat application every 1-2 days until the hyper granulation tissue is level with the surrounding skin OR the wound edge is opened.
22. Remove gloves.
23. Dispose of used supplies and garbage.
24. Perform hand hygiene.
25. Document on client's Wound Assessment and Treatment Form (CLI.4110.SG.002.FORM.07) and Integrated Progress Notes: wound assessment, use of silver nitrate and client response to procedure.

EQUIPMENT/SUPPLIES:

- Non Sterile gloves
- Appropriate wound cleansing agent
- Sterile water
- Wound dressing
- 15cm Silver Nitrate sticks



REFERENCES:

Skin and Wound Product Information Sheet <https://www.clwk.ca/buddydrive/file/silver-nitrate-2/CLI.4110.SG.013.FORM.01> Wound Assessment and Treatment Form