

PRESCRIBERS GUIDE FOR ADVANCED WOUND CARE CLINIC Topical Antimicrobial Indicated in Wounds with Critical Colonization and Infection

SAFEST TOPICAL ANTIMICROBIALS	Agent	Product on Contract	SA	MRSA	Strep	PS	F	Anaerobic	VRE	Comments (Please see Advanced Wound Care Formulary for <u>complete</u> product information)	Available on Contract/ Advance Wound Care Formulary	Authorized Prescriber Prescription required
		Iodophor Ribbon Gauze				٧		Not Known		Not for full thickness burns	No/No	No
		Iodosorb	٧	٧	√	√		٧	٧		Yes/Yes	No
	lodine	Inadine	٧	٧	٧	٧	٧	٧		Do not use Inadine for packing May be used to maintain dry eschar wounds	Yes/Yes	No
	Methylene Blue/ Gentian Violet	Hydrofera Blue	٧	٧	٧	٧	٧	٧	٧	Not like gentian violet solution which is HIGHLY cytotoxic Change dressing when it turns white May be in wound up to 7 days	No/No	No
	Polyhexamethyline Biguanide (PHMB)	Ribbon Gauze	٧	٧	٧	٧	٧	٧	٧	Safer than Chlorhexidine solution itself Bacterial kill occurs largely in/on dressing	Yes/No	No
		Aquacel Ag+	٧	٧	٧	٧	٧	٧	٧	Remove prior to radiotherapy	Yes/Yes	No
		Acticoat Flex	٧	٧	٧	٧	٧	٧	٧	Remove prior to radiotherapy	Yes/Yes	No
	Silver	Silver Sulfadiazine	٧	٧	٧	٧	٧	Not Known	٧	Remove prior to radiotherapy Pseudo -eschar may delay healing Do not use greater than 2 weeks (stop after 1 week use if no improvement) Discard after being open 1 week Use with caution for clients with severe hepatic and /or renal impairment Do not use if sulfa sensitive	Yes/Yes	No



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	Acetic Acid	Solution is available in 0.25%, 1% and 3%. To achieve clinical antibacterial efficacy requires a concentration of at least 0.5%.	1	7		7	7			Requires direct contact with the wound surface for a minimum of 5 minutes to be effective Apply acetic acid (ordered strength) compress to the wound to manage pseudomonas STOP when greenish wound discharge stops Consider protecting peri wound skin during use 1% most commonly ordered, and has least 'sting' associated with application	Yes/No	No
NITIN		Bactigras	4	4		√		Not Known	4	Appropriate for use on 'maintenance' / 'non- healable' wounds	Yes/Yes	No
SELECTIVE USE ANTIMICROBIALS	Chlorhexidine	Chlorhexidine Swabs	1	1			1	1		May use on 'healable' wounds, if reduction of bacterial burden is of greater immediate concern than wound healing (two- week course maximum) In 'healable' wounds, it is best used during the inflammatory stage of wound healing, as it is cytotoxic during the proliferative phase Caution with infants less than 2 months of age Swab may be used to maintain dry eschar when client sensitive to povidone iodine	Yes/Yes	No
	Metronidazole	Metrogel 1%						V		Reserve for use on anaerobes, i.e., to reduce odor	Yes/No	Yes
	Mupirocin	2% Ointment	٧	٧	√					Reserve for MRSA decolonization	Yes/No	Yes



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CAUTIONARY USE	Agent	Product on Contract	SA	MRSA	Strep	PS	F	Anaerobic	VRE	Comments (Please see Advanced Wound Care Formulary for <u>complete</u> product information)	Available on Contract/ Advance Wound Care Formulary	Authorized Prescriber Prescription required
	Bacitracin zinc, neomycin sulfate/Gramicidin (in Canada?) and polymyxin B sulfate	Triple action Polysporin,	٧	٧	٧	٧		٧		Bacterial resistance may develop Cream formulations contain gramicidin instead of bacitracin Potential sensitizer/allergen, especially Neomycin	Yes/No	No
	Fucidic Acid	Fucidin Ointment	٧	٧	٧			٧		Bacterial resistance may develop May sensitize, esp. the ointment form (contains lanolin)	Yes/No	Yes

Legend: (SA=Staphylococcus Aureus), (MRSA=Methicillin Resistant Staph Aureus), (Strep=Streptococci), (PS=Pseudomonas), (F=Fungi – Mucor, Aspergillus, Candida Albicans, Candida Topicals, Candida Glabrata, & Saccharomyces), (VRE=Vancomycin - Resistant Enterococci). This should be after all tables or at the end of all three but not after 2nd table only.