1.0 **OHFT Be****st Practice Statement for lower limb cleansing in people’s homes or community inpatient settings**

**The bowl washing of lower limbs with good quality drinking tap water (Griffiths and Fernandez, 2001) is best practice as part of a holistic approach to skin and wound management (SIGN, 2010, BAD, 2017, NWCSP, 2020).**

**Full immersion should be avoided of ischemic limbs/dry necrosis on feet where treatment aims are to avoid active debridement. Wounds with exposed structures such as bone and tendon should be cleansed using sterile water and not immersed - see the OHFT Wound Standard on the Tissue Viability Website.**

**1.1 If using a reusable bucket/bowl:**

* Ensure bowls are lined with single use liners (preferably white to accommodate the dilution protocol for potassium permanganate, if required – e proc code MVJ011).
* Ensure a new liner, clean water and sterile dressing pack is used for treating each leg. If bilateral legs, dress one leg at a time to reduce risk of cross contamination.
* Wear non-sterile gloves, apron and face protection when disposing of dirty water on completion of each dressing change.
* Dirty water should be disposed of in a toilet with the lid down on flushing to avoid inhalation of aerosols ideally. If this is not practicable, then in outside drain. Do not dispose of dirty water down a kitchen/bathroom sink.
* Clean the bowl/bucket with a Green Clinell Sanitising wipe and store in a clean plastic bag away from obvious contaminates.

**1.2 Only sterile items** (except the tap water itself) should come in to contact with the wound bed. Avoiding direct contact with wound bed, use non-sterile dressing gauze or a clean patient own flannel to cleanse the lower limb.

**1.3 Use Sterile gauze** (from the dressing pack, ordering additional sterile gauze from e-proc code EN1246, as required) for:

* Any cleansing or wiping of the wound bed at any time
* Drying the wound bed and wound margins
* Use patient-own paper kitchen towel, clean patient own towel or couch roll / wiper (e-proc code MRT396) for drying the rest of the leg but **NOT** the wound bed

**1.4 Glove use during dressing changes**

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| **Dressing procedure** | **Type of Gloves** |
| Removing old wound dressing/bandaging and washing/drying lower limb/disposing of dirty wash water | Non-sterile gloves (decanted into a small bag stored in patients dressing box) and apron from dressing pack |
| Wound Bed Cleansing and re-dressing wound bed | Sterile Gloves from Dressing Pack (1 x dressing pack per wound site). If need more sterile gloves e-proc order codes are FTE798 Medium and FTE799 Large |

**References:**

British Association of Dermatologists (BAD) (2017) Venous Leg Ulcers Patient Information Leaflet. Available at: <https://www.bad.org.uk/pils/venous-leg-ulcers/> (accessed 06/07/2022).

Fernandez, R, Griffiths, R., (2012) Water for wound cleansing. Cochrane Database of Systemic Reviews. Issue 2. Art. No: CD003861. DOI: 10.1002/14651858.CD003861.pub3. (accessed 6/7/2022).

Scottish Intercollegiate Guidelines Network (SIGN) (2010) Management of Venous Leg Ulcers. A National Clinical Guideline. SIGN. Pg. 1-46.

National Wound Care Strategy Programme (NWCSP) (2020) Lower Limb: Recommendations for Lower Limb Ulcers. Retrieved from [https://www.nationalwoundcarestrategy.net/wp-content/uploads/2021/04/Lower-Limb-Recommendations-WEB-25Feb21.pdf on the 15.09.2022](https://www.nationalwoundcarestrategy.net/wp-content/uploads/2021/04/Lower-Limb-Recommendations-WEB-25Feb21.pdf%20on%20the%2015.09.2022).