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The Infection Post

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Skin Infections: what you need to know

Risk factors

- Vulnerable population
- Inadequate personal and environmental hygiene
- Overcrowding and close physical proximity
- Sharing personal items
- Colonization

Testing

- Clinical diagnosis by a clinician
- Laboratory testing in consultation with a medical doctor to confirm type of infection
- Consider testing if affected site is not healing

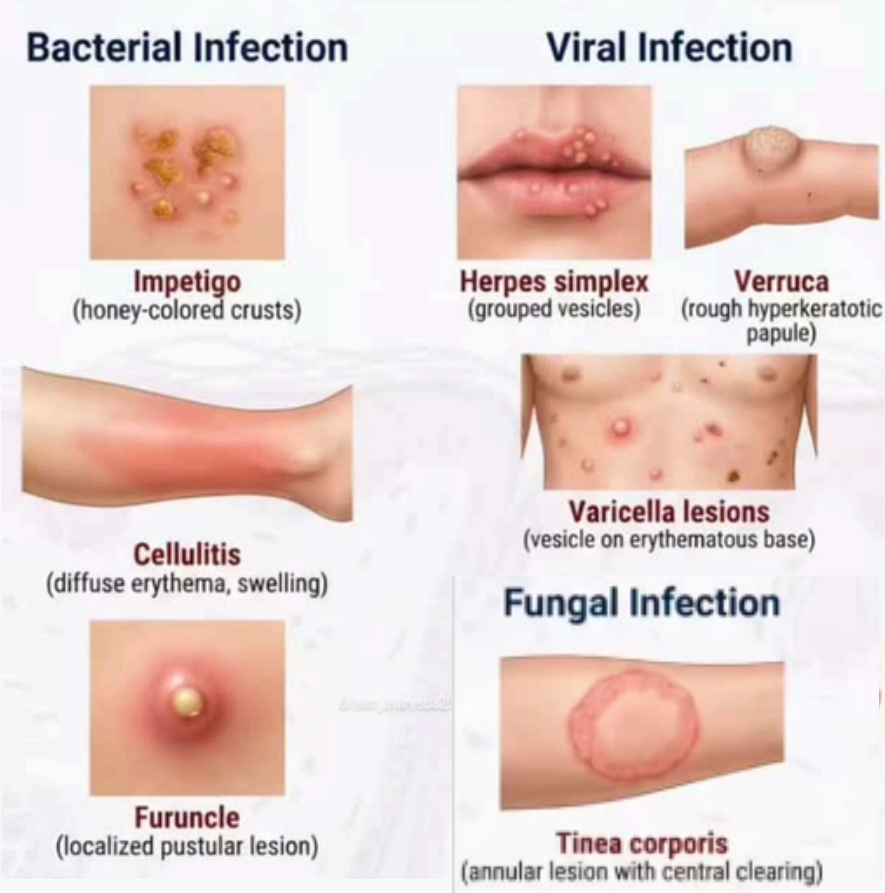
Symptoms

- Heat at the affected site
- Redness at the affected site
- Swelling at the affected site
- Tenderness or pain at the affected site
- Serous drainage at the affected site
- Presense of pus

Prevention strategies

- Routine handwashing or alcohol-based hand rub (ABHR) before/after resident contact
- Regular body hygiene (bathing/showering)
- Staff and resident education on hand hygiene, aseptic procedures
- Prompt cleansing and covering of cuts, ulcers, and abrasions
- Pressure injury prevention (moisture control, repositioning)
- Routine and enhanced cleaning of high-touch surfaces, beds, linens, bathrooms
- Proper use of PPE (especially gloves for wound care or suspected infection
- Avoid sharing personal items (towels, razors, clothing)
- Surveillance: Routine skin assessments at admission and periodically
- Regular staff training
- Decolonization

68% of skin lesions are due to infections



Guidance Documents & Resources

- Surveillance definitions for infections in Canadian long-term care homes.
- Skin Infections: What You Should Know
- The Identification and Treatment of Common Skin Infections
- Analysis of Types of Skin Lesions and Diseases in Everyday Practice