

First Choice Dressings List Formulary Group

Key Points for Prescribing and Requesting Prescriptions for Silver Dressings

Following a review in October 2015 the range of silver dressings on the KCHFT First Choice Dressings List has been reduced. The review group included Tissue Viability Nurses and representatives from community and practice nursing. Practitioners are advised to make a cost-effective choice of dressings from another category wherever possible and to follow the guidance below:

- Nurses and prescribers should be aware that there is insufficient evidence on clinical and cost effectiveness to support the use of silver dressings, which are more expensive than many other types of dressing.
- Review all patients on silver dressings for suitability for switching to non-medicated standard dressings. For patients unsuitable for a switch to standard dressings, chose the most cost-effective dressing based on wound type, healing rate, and whether a healthcare professional is involved in dressing changes.³
- Antimicrobial dressings containing silver should be used only when infection is suspected as a result of clinical signs or symptoms.²
 The official First Choice Dressings Prescription request form must be used and completed fully. Incomplete forms may be returned to nursing teams resulting in possible delay in treatment.
- Prescribe or request a maximum of 5 silver dressings to cover a treatment period of 2 weeks. Treatment should not generally exceed 2 weeks. For dressings designed to stay in situ over a longer period, fewer dressings will be required. Review any prescriptions for 5 or more dressings and any repeatable prescriptions. 3
- Stop silver dressings if the wound does not respond or once infection is controlled.³
- If there is a need to continue treatment for longer than 2 weeks, refer to a Tissue Viability Nurse (TVN) for wound assessment.³ This is a First Choice Dressings List Formulary requirement and **is mandatory for KCHFT staff**.
- Avoid dressings containing silver sulfadiazine if applied to large areas or for a prolonged time, they can cause blood disorders or skin discolouration.²
- Do not use silver dressings when daily dressing changes are required. Use a standard dressing and consider an oral antibiotic, or leave the inner silver dressing intact and change the soiled outer dressing.⁴
- Do not use larger sizes of dressing unless necessary as these sizes are significantly more costly⁵
- Adherence to the First Choice Dressings List Formulary will be audited and reported.

References:

- 1. Health Improvement Scotland. Technologies Scoping Report No. 12, January 2013. Are silver dressings clinically effective and cost effective for the healing of infected wounds and the prevention of wound infection relative to other types of dressing?
- 2. e BNF accessed through Medicines Complete 17.11.15
- 3. PrescQIPP Briefing 53: Wound care Silver dressings http://www.prescqipp.info/silver-dressings/viewcategory/212
- 4. Grier J, Hunter C, Oboh L. Top Tip QIPP messages for prescribing dressings. East & South East England Specialist Pharmacy Services. February 2013. http://www.medicinesresources.nhs.uk/upload/documents/Communities/SPS E SE England/Top Tip QIPP messages for prescribing dressings Vs2 Feb13 LO.pd
- 5. PrescQipp Bulletin 53. March 2014 v. 2.0 http://www.prescqipp.info/silver-dressings/viewcategory/212