

LUHT Critical Care Directorate Guidelines
Faecal Incontinence Dermatitis

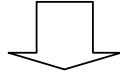
Diarrhoea (>3 loose stools in 24 hours)

- Stool sample to microbiology before 09:00 for C+S, C diff toxin
- Query necessity to treat once result obtained



Skin intact

- Clean with ph cleanser. NO SOAP.
- Apply non-sting barrier film (cavilontm) every 24 hours



Skin irritated

- Clean skin with ph balanced cleanser. NO SOAP.
- Apply non sting barrier film every 24 hours.
- Diarrhoea >=48 hours consider use of rectal bag.
- If bag difficult to adhere consider use of cavilon Lollipoptm to aid adherence.
- Allow cavilontm to dry prior to adherence



Skin excoriated

- Gentle Cleansing with ph balanced foam cleanser. NO SOAP.
- Assess patient suitability for flexisealtm in adherence with company's recommendations. Liaise with nurse in charge.
- Apply zinc oxide based ointment /bandage strips.
- Liaise with dermatology/tissue viability early if problematic.
- Swab area if appears infected.
- Air mattress.
- Ensure initial stool sample has been sent and query necessity to re sample if diarrhoea persists.