



Sternal Wound Care Practices in Maryland Cardiac Surgery Programs

Filiz Demirci¹, Diane Alejo², Clifford Fonner³, Jennifer Bobbitt⁴, Gail Hanna⁵, Michael Fiocco⁵, Karen Getson⁶, Mark Nelson⁶, John Conte², Glenn Whitman², Rawn Salenger⁷, James Todd⁸, Kurt Wehberg⁸ and the MCSQI Collaborative³.



¹ University of Maryland Medical Center, ² Johns Hopkins University School of Medicine, ³ Maryland Cardiac Surgery Quality Initiative, ⁴ Washington Adventist Hospital, ⁵ MedStar Union Memorial Hospital, ⁶ Western Maryland Health System, ⁷ University of Maryland St. Joseph Medical Center, ⁸ Peninsula Regional Medical Center.

Objectives:

- To determine scope of sternal wound practices, variation and potential correlation with deep sternal wound infection (DSWI) rates.
- Although DSWI rates are low (0.3% [0.0-0.6%] in STS Major Cases [2012-2016]), we have selected a systematic approach to evaluate a need for statewide guidelines.

Methods:

- In March 2017, all 10 MCSQI sites were surveyed to assess pre, intra and post-operative wound care practices.
- Multiple practitioners in cardiac surgery were consulted for their initiatives in each phase of wound care and a survey was developed.

Results

- 100% response rate (10/10) from all cardiac surgery programs in the state of Maryland

Conclusions

- Wound care practices in all 3 phases of care are critical for infection prevention.
- Results of our survey demonstrated the variation of practices among sites in spite of low DSWI rates.
- This project promoted discussion and debate regarding the variation.
- Next steps are to determine if selected wound practices should be recommended statewide.
- Other factors such as surgeon skin closure technique may have a role in reduction of sternal wound infection and will be assessed in a future study.

