

If your treatment is to be a success it is essential that you keep your pin sites clean. If your pin sites become seriously infected your treatment may have to be stopped. At worst, a serious pin site infection can lead to 'Osteomyelitis' (infection of the bone).

**...You must keep your pin sites clean...**



Most pin site infections are caused by the bacteria *Staphylococcus Aureus*. *Staph-aureus* live harmlessly on most people, but can cause infection when transferred to broken skin. Therefore,

**Good hand washing technique before pin site cleaning is essential.**

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Author/Contact:

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Jo Bailey

Sheffield Children's   
NHS Foundation Trust

## Looking After Your Pin Sites

### Pin Site Care Information For Patients With External Fixators

#### For further advice contact:

**Main hospital number: 0114 271 7000**

Patient Advice & Liaison Team (PALS)

The Children's Hospital

Western Bank

Sheffield

S10 2TH

PALS office: 0114 271 7594

[www.sheffieldchildrens.nhs.uk](http://www.sheffieldchildrens.nhs.uk)

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Our young patients are at the centre of everything we do and all our work is focused on providing them with the best facilities, equipment and experience possible, helping to provide a world-class facility that is positioned at the very forefront of paediatric care.

The  
Children's  
Hospital  
Charity 

[www.tchc.org.uk](http://www.tchc.org.uk)

Tel: 0114 271 7203

Email: [charity@sch.nhs.uk](mailto:charity@sch.nhs.uk)

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Sheffield 



## WHO TO CONTACT IF YOU'RE WORRIED

Mon - Fri 09.00am – 5.00pm

Paediatric Limb Reconstruction Service

**JONATHAN PAGDIN**, Clinical Nurse Specialist

Tel: 01142 717575 Bleep 803

**JO BAILEY**, Associate Clinical Nurse Specialist

Tel: 01142 717575 Bleep 803

**KIM ALLEN**, Health Care Assistant

Tel: 01142 717575

OR

Ward S3

Tel: 0114 2717394 / 0114 2717392.

There are various suggested ways of cleaning pin sites. There is little evidence to support one technique over another, however, the method described here has been used at Sheffield Children's Hospital consistently and is effective in minimising the risk of pin site infection.

## HOW TO CLEAN YOUR PIN SITES

Using a shower is an effective way of cleaning your pin sites. Shower as normal, but concentrate the spray on your pin sites for a time to help remove any leakage or crusts.

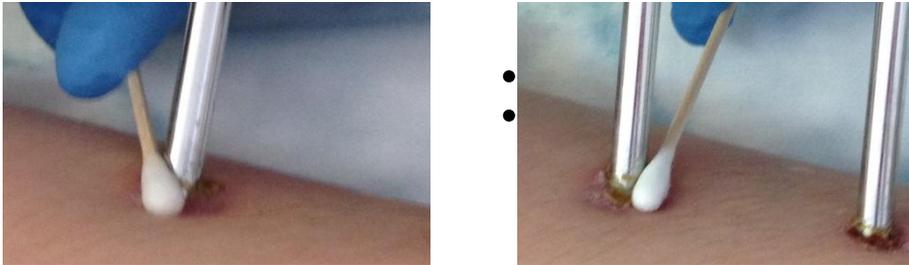
- If your pin sites are clean after showering, dry them using a hairdryer on a **cool setting**.
- If for any reason you are unable to shower (i.e. because of plaster casts or doctors instructions), or you still have crusts on some pin sites then follow the instructions below.

## EQUIPMENT:

- ✓ Hand washing facilities
- ✓ Clean container for cooled boiled water
- ✓ Cotton buds (they do not need to be sterile)
- ✓ Plastic/paper bag to discard used cotton buds following cleaning
- Tie back any long hair, roll up long sleeves and remove watches/bracelets.
- **WASH YOUR HANDS**

## SIGNS OF AN INFECTED PIN SITE

- Using cooled boiled water and cotton buds, wipe around each pin site. Methodically clean one pin site at a time. Clean in a circular motion around the pin site. With one cotton bud, start at a point on the pin site and wipe half way around in one direction. With a second cotton bud continue to clean the other half of the pin site continuing to wipe in the same direction (this helps prevent cross infection).



- You may need to use several buds in order to remove stubborn crusts. Alternating 'wet' and 'dry' cotton buds can help.
- Dry each pin site after cleaning with wet cotton buds.
- The fixator frame can be kept clean using a clean cloth or aseptic wipe.
- We advise leaving pin sites uncovered so they remain dry. Do not use **any** creams, as they make the pin site soggy and encourage infection.
- We may advise the use of 'Bolster dressings'. If required, you will be taught how to do these before being discharged from hospital.
- Occasionally, the skin may grow up a wire or pin. This is called 'tenting'. If this happens, wash your hands and gently massage the skin around the affected pin site to free it. If necessary, massaging can be done several times a day.



If a pin site becomes painful, red or discharges pus, then increase pin site cleaning to two or three times a day. If there is no improvement after 24 hours, contact your G.P. who will prescribe a course of oral antibiotics. They may take a 'swab' of the site. You can also contact the hospital on the numbers provided.