




Skin and Wound Product Information Sheet

Silver Nitrate (AgNO₃) Sticks

Classification	Cautery Agent – Silver Nitrate
Key Points	<ul style="list-style-type: none"> • A wooden stick with tip covered with combination of 75% silver nitrate and 25% potassium nitrate; an effective chemical cautery agent. • For hypergranulation tissue, silver nitrate is an advanced treatment and should only be used if basic treatment strategies are not effective; see Hypergranulation Tissue: Guideline. • Nurses must review their health authority/agency policy to determine permission to apply to apply silver nitrate and for which indications (see below). <ul style="list-style-type: none"> ○ A Physician/NP/NSWOC/Wound Clinician order may be needed, as per health authority/agency policy.
Indications	<ul style="list-style-type: none"> • For removal of hypergranulation tissue associated with: <ul style="list-style-type: none"> ○ Wounds/incisions. ○ Skin graft sites. ○ Feeding tubes. ○ Medication tubes. ○ Surgically-placed tubes/drains. ○ Stomas. ○ Mucous fistulas. ○ Finger and/or toe nail fold. • For removal of suture granulomas, (e.g., incision, stoma mucocutaneous margin). • To open rolled wound edges (epibole). • As a hemostatic agent for small bleeds.
Precautions	<ul style="list-style-type: none"> • Consider medication for pain management either before or after treatment. <ul style="list-style-type: none"> ○ Stop treatment if the client experiences pain. • Do not apply to intact or unprotected skin.
Contraindications	<ul style="list-style-type: none"> • Sensitivity or allergy to silver. • Silver nitrate should not be used, unless directed by a Physician/NP/NSWOC/Wound Clinician, on hypergranulation tissue associated with enterocutaneous fistula (ECF), exposed bowel within a wound, or on a burn or frostbite injury.
Formats & Sizes	<ul style="list-style-type: none"> • Sticks <ul style="list-style-type: none"> ▪ 15cm <div style="text-align: center;">  </div>

Application Directions	Rationale
Cleanse the wound and peri-wound skin with sterile normal saline or agency approved wound cleanser; blot the wound bed to remove excess moisture.	Excessive normal saline will decrease or inactive the effectiveness of the silver nitrate.
Apply a skin protectant e.g., petroleum jelly to peri-wound skin or No-Sting skin-prep for peri-ostomy prior to the application.	Protects the skin from the silver nitrate’s cautery effect.
General Application Tips	
Check the tip of the stick to ensure it is well covered with silver nitrate powder.	The silver nitrate powder may have been rubbed off while the stick has been in the container.
If there is enough moisture in the wound, then use the stick dry; if not, then moisten the tip of the silver nitrate stick with sterile water.	Activate the silver nitrate by either wound fluid or sterile water. Normal saline will decrease or inactive the effectiveness of the silver nitrate.
Apply silver nitrate to area of concern until tissue cauterized (turns a grayish colour). If the area is very moist, it will be necessary to use more than one stick.	



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Specific Applications	Rationale
<ul style="list-style-type: none"> • <u>Application for hypergranulation tissue or granuloma:</u> <ul style="list-style-type: none"> ○ Use firm pressure and roll the stick back/forth to cover the entire area of concern until the area turns a grayish colour. ○ Apply an absorbent dressing that will manage the moisture. ○ Correctly secure tubes/drains to prevent friction and/or pressure. • <u>Application for rolled wound edges:</u> <ul style="list-style-type: none"> ○ Use firm pressure and roll the stick back/forth over the entire length of the rolled (epibole) edge until the edge turns a grayish colour. ○ Fill/pack the wound with appropriate type and amount of wound filler. • <u>Application as a hemostatic agent:</u> <ul style="list-style-type: none"> ○ Hold the stick, using firm pressure, over the site of the bleed. ○ Cover with a dressing that will support hemostasis, (e.g., an alginate dressing such as Kaltostat). 	<p>As hypergranulation tissue is friable, the application of pressure may cause a small amount of bleeding; the silver nitrate will help to stop the bleeding.</p> <p>Too much moisture and presence of friction/pressure promotes the formation of hypergranulation tissue.</p> <p>Appropriate filling/packing a wound will support an open wound edge; see Wound Packing Procedure.</p>
Frequency of Application	
<p><u>Hypergranulation tissue/granuloma:</u> repeat the application, daily or with dressing changes until hypergranulation tissue/granuloma is level with the surrounding skin <u>or</u> up to 14 days.</p> <p><u>Closed wound edge:</u> repeat application every 2-3 days until the wound edge is opened <u>or</u> up to 14 days.</p> <p><u>Small bleed:</u> one session, using one or two sticks depending upon the amount of bleeding.</p>	<p>More than one application may be needed to completely remove the hypergranulation tissue. If not removed within 14 days, consult Physician/NP/NSWOC /Wound Clinician.</p> <p>More than one application is usually needed to open a closed wound edge. If not opened within 14 days, consult NSWOC/Wound Clinician.</p> <p>If silver nitrate not effect in controlling bleeding then apply pressure and call Physician/NP if needed.</p>
Expected Outcome	
<p>Hypergranulation tissue/granuloma will be removed.</p> <p>Rolled wound edge (epibole) will be opened.</p> <p>Small bleed is resolved.</p>	
<p>For further information, please contact your NSWOC/Wound Clinician.</p>	