



# ABSCESS PATHWAY

Referral from GP, ED, Paramedic  
Via Triage Nurse/Careflow

**Stable:**  
Meets SDEC criteria

**Unstable:**  
News  $\geq 4$   
New confusion  
Immobile/unable to sit in chair  
Unstable diabetes  
Immuocompromised  
IV drug use  
Extensive cellulitis

Clinical history and examination  
completed in SDEC.  
Observations and pain score.

Abscess confirmed  
by senior decision  
maker

ADMIT TO SAU  
For surgery next available slot

If no obvious  
collection,  
consider oral  
antibiotics as  
per local  
policy.

**Local  
Anaesthetic:**  
Abscess suitable  
for I+D in  
SDEC.

**General anaesthetic:**  
Abscess requires I+D under  
GA.  
Consent patient in SDEC.  
Provide abscess patient  
information leaflet.  
Book on theatre list.  
Discharged home to return  
the following day for I+D  
Complete discharge  
summary.

Home with discharge summary and information sheet detailing wound care.  
Safety netting advice.  
No routine follow up.

## Referral of patients with an Abscess

Anatomical Site of Abscess	Speciality (Contact)
Head & Neck – including Face and Cellulitis	ENT or Max Fax at UHBW SpR via UHBW switch
Uncomplicated Cellulitis - anywhere below the neck	Acute Medicine Bleep 1777
Trunk – inc axilla, groin and perianal (except:)	Emergency GI Surgery NEWS >2 admit, <2 SDAU – Hub 40700
Breast (unless septic – admit SAU)	Next breast clinic. Email - <a href="mailto:breastcareAdmin@nbt.nhs.uk">breastcareAdmin@nbt.nhs.uk</a> & call 48321
Penis, Scrotum & Fourniere's	Urology SpR via Switch
Labial / vaginal	Gynaecology Bleep 9338
Limbs – Where the cellulitis is across a joint (eg Shoulder, Elbow, Hip, Knee, Foot, Ankle)	Orthopaedic Surgery Bleep 9753
Limbs – Where the cellulitis is NOT across a joint but: all wrist / hand infections	Plastic Surgery Bleep 1311
Diabetic feet / Infected leg ulcers	Vascular Surgery SpR via Switch
Surgical Site Infections	Original operating specialist surgeon / surgical service