Wound Assessment & Product Selection

I am a new treatment nurse in Dallas, TX. My facility uses a standardized wound protocol and product formulary for wound treatments. I’m not clear about how to match the wound and the correct protocol. Can you describe a process that will help assess the wound and select the appropriate products?

Q:

Clinicians can ask themselves 6 simple questions for wound assessment and then refer to their facility treatment guidelines.

A:

We recommend you copy our newsletter and post for your clinicians to read. After all clinicians have initialed, file in an education binder. During survey, this binder will document multiple educational opportunities you have provided.

1. Is the wound still healing?
   – If yes, continue with the current best practice treatment. It is reasonable to see wound healing progress within 2 to 4 weeks.
   – If no, assess bioburden, evaluate nutrition, pressure, debris in the wound bed, circulation, medications and comorbidities.

2. Is the tissue viable or necrotic?
   If the tissue is viable, support it by keeping it moist. Healthy tissue is red or pink. Necrotic tissue can be yellow, gray, black or a combination. It is important to remove dead tissue to help reduce bacterial contamination. If the tissue is dead, debride it.

3. Is the wound wet or dry?
   An adequate amount of moisture is necessary for healing. If the wound is wet, select a product that manages exudates and maintains a moist wound bed. If the wound is dry, select a product that donates moisture such as a gel or hydrogel.
4. **Is the wound bed deep or superficial?**

If the wound has deep spaces, fill it. If the wound bed is superficial, cover the wound to help protect it; provide a physical barrier to microbes, and maintain a moist insulated wound bed.

5. **Does the wound or surrounding area have edema?**

Many wounds are edematous, and lower-extremity wounds often develop secondary to poor venous return. Evaluate lower-extremity wounds and consult the physician about compression therapy.

6. **What is the condition of the skin surrounding the wound?**

Using a skin preparation to surrounding skin before applying any dressing will help strengthen and protect the peri-wound skin. Also check for conditions such as candidiasis, which often accompanies wounds in dark moist areas.

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**Tip for Extending Wear Time of the Dressing**

To increase wear time, warm the dressing in your hands before applying to the wound. After the dressing is secure, hold your warm hand over the dressing for 30 seconds to increase adhesion.