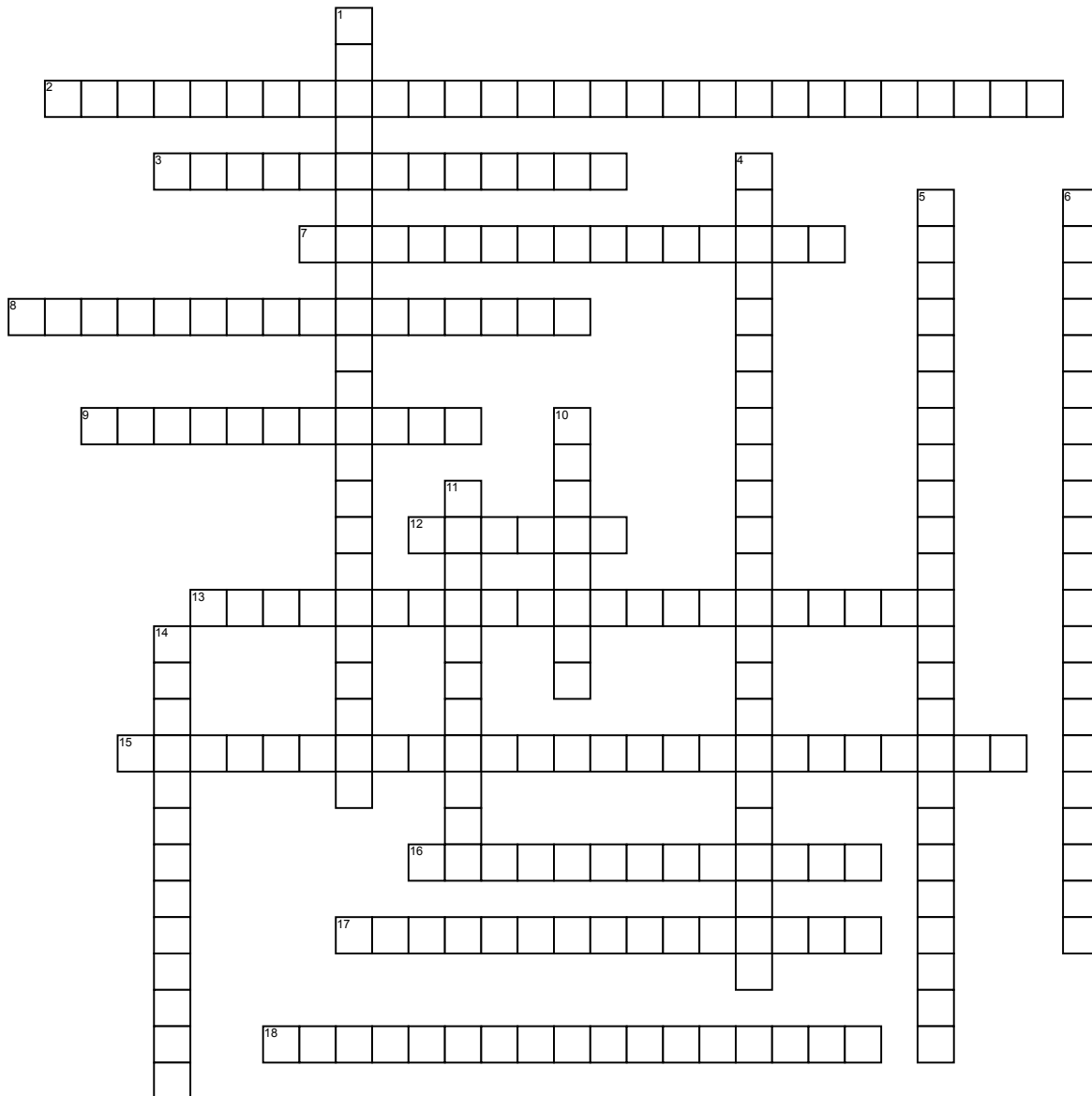


WOUNDS Tara Page In-service 2018



Across

- 2.** Diffuse area of erythema with irregular edges that may extend to skinfolds, between buttocks, and down inner thighs. May contain papules, scaling, or vesicles.
- 3.** This should be done on every patient with wounds on every shift.
- 7.** Eschar, necrosis, least healthy wound color.
- 8.** Slough, exudate produced by microorganisms.
- 9.** Fresh blood red with a thin consistency.
- 12.** Clear to light yellow with a thin, watery consistency
- 13.** May be intact or an open serum-filled blister. Partial thickness loss of skin with exposed dermis; pink, red, and moist
- 15.** Full thickness skin and tissue loss with a wound bed covered by eschar, slough, or both.

Down

- 16.** Mainly on lateral feet or lower legs. Shiny and taut skin that is pale when elevated. Deep punched-out wound appearance with minimal exudate. Skin temp is cold and pedal pulses are diminished or absent. Capillary refill is delayed.
- 17.** Red to light pink color with a thin, watery consistency.
- 18.** Usually found on bottom of foot or end of toes. Red crater surrounded by a thickened layer of calloused skin. Wound may extend to tendon or bone
- Down**
- 1.** Full thickness skin and tissue loss with directly palpable fascia, bone, tendon, ligament, cartilage, or muscle. Slough and eschar may be present and undermining and tunneling are common.

4. Full thickness loss of skin with subcutaneous fat visible. Bone, muscle, ligament, tendon, cartilage, or fascia is not visible.

5. Localized area of intact or nonintact skin with persistent, nonblanchable deep red, purple or maroon discoloration or epidermal separation that reveals a dark wound bed or blood filled blister.

6. Localized area of intact skin with nonblanchable redness.

10. Creamy yellow, green, white or tan with a thick, opaque consistency.

11. Usually on lower legs or ankles. Ruddy to brown staining with irregular wound margins and moderate to heavy exudate. Skin is warm with edema. Pedal pulses are present and capillary refill is normal.

14. Healthy granulation tissue-normal healing