

Wound Assessment & Management

A Wound Assessment Handout

Wound Assessment

Systematic process of assigning numbers/grades to the wound/wound characteristics during an exam. Includes:

- Tests
- Examination
- Evaluation

Purpose of Wound Assessment

- Examine the severity of a wound
- Determine the status of wound healing
- Establish a baseline for the wound
- Prepare a plan of care
- Report observed changes in the wound overtime

Wound Characteristics to Assess

- Location (use anatomic terms)
- Age of wound, i.e. days, weeks, months, years
- Wound size
- Depth of tissue injury
- Undermining and/or tunneling
- Necrotic tissue
- Granulation tissue
- Epithelial tissue
- Exudate

Components of Wound Size

- Area (length x width)
- Depth
- Volume

The South West Regional Wound Care Program



Vision: Integrated, evidenced-informed skin and wound care – every person, every health care sector, every day.

Mission: To advocate for the seamless, timely and equitable delivery of safe, efficient, and effective, person-centered, evidenced-informed skin and wound care to the people of the South West LHIN, regardless of the healthcare setting.



swrwoundcareprogram.ca

Wound Assessment & Management



Wound Closure Rates

- In general, a 20-30% reduction in surface area over a three to four week period is a reliable predictive indicator of timely chronic wound healing. Specific closure rates:

Etiology	% Reduction in Surface Area as a Predictor of Wound Healing
Venous Leg Ulcer	>28.79% at 4 weeks will close by 24 weeks
Diabetic Foot Ulcer	>50% at 4 weeks will close by 12 weeks
Pressure Ulcer	>39% after 2 weeks will close more quickly
Open Surgical Wound (average size of 10cm ²)	50% at 13 days will close by 21 days

Calculating % Surface Area Reduction

$$\frac{\text{Surface Area (admission/initial)} - \text{Surface Area (current)}}{\text{Surface Area (admission/initial)}} \times 100 = \text{_____ \% reduction}$$

Necrotic Tissue Description

Color	Consistency	Adherence
White/gray	Mucinous	Clumps
Yellow fibrinous	Soft, stringy	Loosely attached
Yellow/tan (slough)	Soft, soggy	Attached at the base only
Black/brown (eschar)	Hard	Firmly adherent to base and edges

Wound Exudate Description

Exudate Descriptor	Color and Consistency
Serous	Clear/light yellow, thin/watery
Sero-sang	Pink → light red, thin/watery
Sang	Bright red, thin/watery
Purulent	Darker yellow/tan or blue/green, thin → thick, watery → opaque
Other	Some dressings and topicals can alter the appearance of exudate, i.e. silver, cadexomer iodine, etc.