Characteristics of Wound Types

		Citaract		Wound 1		
	Pressure	IAD	ITD	Arterial	Venous	Neuropathic
	 At any site 	Fatty tissue	 Intergluteal 	 Tips of toes 	Medial lower leg and	Plantar
	 Over bony 	of the	cleft	 Between 	ankle,	aspect of foot
	prominenc	buttocks	• Skin folds	toes	Malleolar area	• Over
	es	Perineum	Beneath the	• Over	Seldom on the foot	metatarsal
	55	Inner thigh	pannus	phalangeal	or above the knee	heads
		• Groin	Underneath	heads	or above the knee	Under heel
Location		T0 7000	Breasts	• Around		• Toes
		May occur		lateral		Areas of foot
		over bony	Groin crease			
		prominence		malleolus		exposed to
				• Pressure		repetitive
				points from		trauma
	000 00 000		1	foot wear		10. 10. 10. 10.
	 Isolated 	 Consolidated 	 Mirror-image 	 Isolated 	 Isolated individual 	• Isolated
Distribution	individual	or	on each side	individual	lesions	individual
	lesions	Patchy	of skin fold	lesions		lesions
	• Rounded,	• Diffuse	• Linear	• Round	Irregular	Well defined
	crater-like	Kissing ulcer		• Even wound	Poorly defined	• Round or
	shape	Anal cleft-		margins	,	oblong
Shape	Shape of	linear		Punched		58
	object that	IIIIcui		out		
	caused the			appearance		
	pressure			арреагапес		
	• Partial	Partial	Partial	Shallow to	Superficial	• Deep
		Thickness	Thickness			• Беер
Depth	or	inickness	inickness	deep	Deep with	
	• Full				associated	
	Thickness				complications	
	 Erythema 	Non-uniform	• Mild	• Pale	 Red ruddy granular 	• Varies
	Slough	redness	erythema	Slough	 May have slough or 	Granular
	Eschar	Pink/white)	 Inflammation 	Eschar	eschar	Necrotic
Wayna Dad	 Granulation 	 Peri-anal 	with erosion	 Epithelial 	Exudate moderate to	 Pale if co-
Wound Bed	• Epithelial	redness	 Oozing 	• Non-	heavy	existing
	• Bone	• NO	Exudation	granular		arterial
	 Ligaments 	NECROSIS	 Maceration 	Minimal		disease
	• Tendons		Crusting	exudate		
	Varies	Varies	Maceration	• Pale	Dry or wet thin scaly	Callused
	50 (500 (500 C))	- varies			skin	- Calluseu
	• Non-		Secondary Bacterial or	• Hairless	60 Mt 1000 Sc	
Cumanus din	blanchable		Bacterial or	• Cyanosis	Lipodermatosclerosis	
Surrounding	erythema		Fungal	• Cool to	Hemosiderin Hemosiderin	
Skin			infections	touch	Firm edema	
				Skin thin	Dermatitis	
				and shiny	 Evidence of healed 	
					ulcers	
	• Pressure	Moisture	 Pain, itching, 	 Absent or 	Perfusion	• Diminished or
	and/or	must be	burning, and	diminished	Diminished on with	absent
	shear must	present	odor	pulses	co-existing arterial	sensation in
	be present	If necrosis	 Perspiration 	• ABI ≤ 0.9	disease	foot
		occurs	with or	Intermittent	Dilated superficial	• Foot
Associated		reassess for	without	claudication	veins	deformities
Findings		pressure	friction	Resting pain	• Dry, thin skin	Palpable
		pressure	meaon	- resum bain	- Dry, tilli skill	
						pulses
						Warm foot
						Subcutaneous
						fat atrophy