

Pressure Injury/ Ulcer

Pressure injuries occur as a result of intense and/or prolonged pressure or pressure in combination with shear.

The tolerance of soft tissue for pressure and shear may also be affected by microclimate, nutrition, perfusion, comorbidities, and condition of the soft tissue (NPIAP, 2019).

Wound Identification – First Step in Proper Treatment

It is imperative to determine the etiology of all wounds and lesions, as this will determine and direct the proper treatment and management of the wound.

Wound Types:

- **Vascular insufficiency:**
 - **Venous:** most commonly occur proximal to the medial or lateral malleolus, above the inner or outer ankle, or on the lower calf area of the leg.
 - **Arterial:** commonly occur on the tips and tops of the toes, tops of the foot, or distal to the medial malleolus.
 - **Mixed or combination of both types of insufficiencies.**
- **Diabetic Foot Ulcers:** Ulcers caused by the neuropathic and small blood vessel complications of diabetes. Most commonly occur on the plantar surface of the foot, on load-bearing areas such as the ball of the foot.
- **Moisture-associated skin damage:** Superficial skin damage caused by sustained exposure to moisture such as incontinence, wound exudate or perspiration.
- **Skin tear:** A result of shearing, friction or trauma to the skin that causes a separation of the skin layers.

Common Locations of Pressure Injuries

- **Over bony prominences**
- **Tissues beneath or surrounding devices:**
 - **Medical Devices/Equipment:** Oxygen tubing, feeding tubes, catheters, cast, splints, compression hose/devices, etc.
 - **Non-Medical Devices:** Shoes, glasses, hearing aids, earrings and other jewelry, piercings, etc.

Simple Strategies for Wound Identification and First Step in Proper Treatment