WOUND/SKIN HEALING RECORD										
DIRECTIONS: Use a separate sheet for each site. Select the response that best describes the wound. Record text where indicated (line). Record measurements to the nearest 1/10th centimeter.										
O Arterial Ulcer O Diabetic Ulcer O DTI O Venous Ulcer O Pressure Injury O Other										
IDE	NTIFY SITE ON DIAGRAM BELOW			DESCRIPTION OF	STAGES					
£ 3)			Stage 1: Intact skin with a localized area of non-blanchable erythema, which appear differently in darkly pigmented skin. Presence of blanchable erythredness or changes in sensation, temperature or firmness may precede v changes. Color changes of intact skin, such as purple or maroon discoloramay indicate deep tissue pressure injury.							
[,7,1]			Stage 2: Partial-thickness loss of skin with exposed dermis. The wound bed is viable, pink or red, moist and may also present as an intact or open/ruptured blister. Granulation tissue, slough and eschar are not present.							
			Stage 3: Full-thickness loss of skin, in which subcutaneous fat may be visible in the ulcer and granulation tissue and epibole (rolled wound edges) are often present. Slough and/or eschar may be visible but does not obscure the depth of tissue loss. Undermining and tunneling may occur. Fascia, muscle, tendon, ligament, cartilage and/or bone are not exposed.							
		3	Stage 4: Full-thickness skin and tissue loss with exposed or directly palpable fascia, muscle, tendon, ligament, cartilage or bone in the ulcer. Slough and/ or eschar may be visible. Epibole (rolled edges), undermining and/or tunneling often occur. Depth varies by anatomical location.							
	Anterior Posterior		Unstageable Pressure Injury: Full-thickness skin and tissue loss in which the extent of tissue damage within the ulcer cannot be confirmed because it is obscured by slough or eschar. If slough or eschar is removed, a Stage 3 or Stage 4 pressure injury will be revealed.							
	XI YIX		Deep Tissue Pressure Injury: Intact skin with localized area of persistent non-blanchable deep red, maroon, purple discoloration due to damage of underlying soft tissue.							
DATE OF ONSET_	DATE HEALED		Medical Device Related Pressure Injury: Pressure injury resulting from the use of devices designed and applied for diagnostic or therapeutic purposes. The discoloration may appear differently in darkly pigmented skin. The resultant pressure injury generally conforms to the shape of the device. This injury should be staged using the staging system.							
NOTE: When documenting the length and width of a pressure injury, use the resident's/patient's body as a road map. The head at north and the feet at south. The width should be measured from side to side. Mucosal Membrane Pressure Injury: Found on mucous membranes we a history of a medical device in use at the location of the injury. Due to the anatomy of the tissue, these injuries cannot be staged.										
	DE	ESCRIPTION	ON OF WOUND	BED						
	new skin growing in superficial wound. It			even in persons with darkly pi	gmented skin.					
	e - pink or red tissue with shiny, moist, gra									
	r white tissue that adheres to the wound be Eschar) - black, brown, or tan tissue that ad	_			or or harder than surrounding skin					
	EXUDATE TYPE O None			1	Normal O Pink O Bright Red					
DATE	O Serosanguineous			O White/Gray Pallor O Dark F						
O Other	3 O 4 O Unstageable ODOR O None O Slig			EDGES O Normal O Peripheral O Hardness/Induration O Rolled Edges						
SIZE IN CM (LENGTH X WID	O Moderate O Large	O Copious		CULTURE SENT O No O Yes,	· ·					
DEPTH (cm)	WOUND BED O Normal O Granulation Tissue				Results					
9 • 3	PAIN: Is patient experiencing pain related to wound? ○ No ○ Yes ○ Unable to communicate Non-verbals demonstrated: □ Diaphoresis □ Grimacing □ Moaning/Crying □ Guarding □ Irritability □ Diaphoresis □ Grimacing □ Moaning/Crying □ Guarding □ Irritability									
Tunneling (cm)	□ Anger □ Tense □ Restlessness □ Change in vital signs □ Other: Date Family/Representative Notification									
Undermining (cm)	Pain Location (specify site(s)):	Date Physician Notified								
Present level of pain	Nature of Pain (specify):		Frequence	y: O Episodic O Continuous						
Worst pain gets	(using scales at right) 0-10 Numeric Pain		() () () () () () () () () ()		Response to Treatment O Improved O Healed O Deteriorated O No Change					
Best	Intensity Scale 0 2 No Hurt Hurts Lir		4 6 Little More Hurts Even Mo	8 10 ore Hurts Whole Lot Hurts Worst	Plan of Care Updated O No O Yes					
Acceptable level of pain	From Wong D.L. Hockenberry-Eaton M., Wilson D., Wirkelstein M.L., Schwartz P.; Wong's Essentials of Pedatric Nursing, ed. 6, St. Louis, 2001, p. 1301. Copyrighted by Mosby, Inc. Reprinted by permission.	2 3	4 5 6 Moderate Pain	7 8 9 10 Worst Possible Pain	Comments					
Signature/Title	Mosby, Inc. Reprinted by permission.			r OSSIDIE FAII1						
NAME Loot	First A.A.	iddle	Attending Physicia	n Record No	. Room/Bed					
NAME-Last	First Mi	IGGIE	TRUEDUNO PHYSICIA	I Record No	. I DOUII/DEG					

			0.0			N	DI L ODI II D I		
DATE		Surrounding skin color O Normal O Pink O Bright Red O Serosanguineous Surrounding skin color O Normal O Pink O Bright Red O White/Gray Pallor O Dark Red/Purple O Black/Brown							
STAGE 01 02 03 04 0 Unstageable		'				EDGES O Normal O Peripheral			
O Other		EXUDATE AMOUNT O None O Scant O Small Tissue Edema O Maceration				O Hardness/Induration O Rolled Edges			
SIZE IN CM (LENGTH X WID	OTH)	O Moderate O Large O Copious WOUND BED O Normal O Epithelial Tissue CULTURE SENT O No O Yes,					Date		
DEPTH (cm)		O Granulation Tissue O Slough O B		Results					
12	PAIN: Is patient expe	Date Dietary Notified							
G G	☐ Anger ☐ Tense	Date Family	//Representative Notified						
Tunneling (cm)	Pain Location (spec								
Undermining (cm)		Date Physic	cian Notified						
Present level of pain	Nature of Pain (specify): Frequency: O Episodic O Continuous Intensity:				Continuous	Posponso	to Treatment		
Worst	(using scales at right		ved O Healed						
pain gets	0-10 Numeric Pain			(<u>*</u>			orated O No Change		
Best	Intensity Scale	0 2 No Hurt Hurts Little Bit Hurts L	4 6 ittle More Hurts Even More	8 re Hurts Whole Lot H	10 lurts Worst	Plan of Car	e Updated O No O Yes		
pain gets	From Wong D.I. Hockenherny-F		 		<u> </u>	Comments			
Acceptable level of pain	From Wong D.L., Hockenberry-Eaton M., Wilson D., Winkelstein M.L., Schwartz P.: Wong's Essentials of Pediatric Nursing, ed. 6, St. Louis, 2010, p. 1301. Copyrighted by Mosby, linc. Reprinted by permission.								
Signature/Title					3)1313				
		EXUDATE TYPE O None O Serous	O Purulent	SURROUNDING SKIN	LCOLOR O	Normal 0 1	Pink ABright Pod		
DATE		O Serosanguineous	Furuient	White/Gray Pallo		\ \	/ \ •		
STAGE 01 02 0	· ·	ODOR O None O Slight O Model EXUDATE AMOUNT O None O Scal	11611	SURROUNDING TISS	UE/WOUND E	DGES ON	ormal O Peripheral duration O Rolled Edges		
SIZE IN CM (LENGTH X WID		O Moderate O Large O Copious		CULTURE SENT O	. \	\	datation o notice Luges		
DEPTH (cm)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	WOUND BED O Normal O Epithelia O Granulation Tissue O Slough O B		COLIGNE SENT ST	\ \	Results			
(12)	DAINI, le netient eve	5,59,10	, , ,	Do 40			ny Notified		
9 • 3	PAIN: Is patient experiencing pain related to wound? ○ No ○ Yes ○ Unable to communicate Non-verbals demonstrated: □ Diaphoresis □ Grimacing □ Moaning/Crying □ Guarding □ Irritability Date Dietary Notified								
	☐ Anger ☐ Tense	Restlessness Change in vital	signs 🚨 Other:			Date Family	//Representative Notified		
Tunneling (cm)	Pain Location (spec	cify site(s)):							
Undermining (cm)						Date Physic	cian Notified		
Present level of pain	Nature of Pain (spec	cify):	Frequency	y: O Episodic O C	Continuous				
Worst	Intensity: (using scales at right		(66)	(30)	200	1// . //	to Treatment ved O Healed		
pain gets	0-10 Numeric Pain					11/15	orated O No Change		
Best	Intensity Scale	0 2 No Hurt Hurts Little Bit Hurts	4 6 ittle More Hurts Even Mor	8 re Hurts Whole Lot H	10 lurts Worst		e Updated O No O Yes		
pain gets	Even Word Di Hadisəhamı				4111 J	Comments			
Acceptable	From Wong D.L., Hockenberry-E Wilson D., Winkelstein M.L., Sch Wong's Essentials of Pediatric Nu 6, St. Louis, 2001, p. 1301. Copyr Mosby, Inc. Reprinted by permission	reation M., wartz P.: rising, ed. included by No Pain	4 5 6 Moderate Pain	7 8 9	10 Worst				
level of pain	Mosby, Inc. Reprinted by permission	n.		O Po	ssible Pain				
Signature/Title									
DATE		EXUDATE TYPE O None O Serous	O Purulent				Pink O Bright Red		
STAGE 01 02 Ø	3 O 4 O Unstageable	O Serosanguineous ODOR O None O Slight O Model		O White/Gray Pallo					
O Other	n \	EXUDATE AMOUNT O None O Scal					ormal O Peripheral duration O Rolled Edges		
SIZE IN CM (LENGTH X WID	NTW)	O Moderate O Large O Copious		CULTURE SENT O			•		
DEPTH (cm)	////	WOUND BED O Normal O Epithelia		COLIONE SENT		Results			
DEFINICINI)		O Granulation Tissue O Slough O B	, , ,				n. Notified		
9 • 3		eriencing pain related to wound? O N strated: Diaphoresis D Grimacing			itability	Date Dietar	y Notified		
6		Restlessness Change in vital	0 , 0		itability	Dota ["	//Poproportative NI-tifi: 1		
Tunneling (cm)		•	aigna 🗖 Other:			Date Family	//Representative Notified		
Undermining (cm)	Pain Location (spec	ary site(s)):				Det- Di :	nion Notifi		
	Notice of D : /		F		Pantin	Date Physic	cian Notified		
Present level of pain	Nature of Pain (spec Intensity:	city):	Frequency	y: O Episodic O C	ontinuous	Response f	to Treatment		
Worst	(using scales at right) (((((((((((((((((((to Treatment ved O Healed		
pain gets	0-10 Numeric Pain			Č (orated O No Change		
Best	Intensity Scale	0 2 No Hurt Hurts Little Bit Hurts L	4 6 ittle More Hurts Even Mor	8 re Hurts Whole Lot H	10 lurts Worst	Plan of Car	e Updated O No O Yes		
pain gets	Even Mon- Di				⊣	Comments			
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level of pain	6, St. Louis, 2001, p. 1301. Copyr Mosby, Inc. Reprinted by permission	rignted by ······. n.		Po	ssible Pain				
Signature/Title									
NAME-Last	First	Middle	Attending Physician	<u> </u>	Record No.		Room/Bed		
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