

SEEK & FIND: WOUND



Student Name _____ Date _____

Instructor Signature _____ Student's earned points ____/20

For each item in column A, select two different and appropriate **topical therapies**. If you choose a primary dressing that also requires a secondary dressing, be sure to identify the secondary dressing type as well in order to receive full points. This pairing (a primary with a secondary dressing) would be considered one answer. Identify each type of dressing used by category and brand name.

Answer questions in column B.

Submit to your dropbox when finished.

Use the product name & NOT the product number when completing this assignment.

Column A	Possible Points	Earned Points	Column B	Possible Points	Earned Points
Topical therapy: Category and brand name of specific product(s) to be used Example: Foam; Restore Foam with adhesive border, 4" x 4"					
Wounds with small amounts of drainage. 1. _____ 2. _____	0.5		Any special cautions when using the chosen products?	0.5	
Sacral wound covered with intact eschar. 1. _____ 2. _____	1		Would you change your topical therapy choice if the wound presented as boggy, odorous, draining thick exudate with a 2 cm. area of erythema surrounding the wound? If so, what actions would you initiate?	2	

**** This assignment may also be completed via an internet search.**

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<p>Wounds with 90% yellow adherent slough.</p> <p>1. _____</p> <p>2. _____</p>	1		<p>Identify two (2) actions used to prevent periwound maceration.</p> <p>1. _____</p> <p>2. _____</p>	1	
<p>Type 3 skin tear.</p> <p>1. _____</p> <p>2. _____</p>	1		<p>Identify at least two (2) other nursing actions to be implemented for an individual with fragile skin.</p> <p>1. _____</p> <p>2. _____</p>	1	
<p>Deep tissue injury (DTI)</p> <p>1. _____</p> <p>2. _____</p>	1		<p>Identify an additional nursing action for an individual with a DTI.</p>	1	
<p>Red, granulating stage 3 sacral pressure injury with little exudate.</p> <p>1. _____</p> <p>2. _____</p>	1		<p>Identify an <u>advanced wound therapy</u> that could be used with this wound type.</p>	1	
<p>Heavily draining stage 4 sacral injury.</p> <p>1. _____</p> <p>2. _____</p>	1		<p>Identify an appropriate support surface to use with this patient (category/brand name).</p>	1	

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<p>Stage 4 ischial pressure injury, 80% granulation tissue, 20% slough with tunneling and undermining.</p> <p>1. _____</p> <p>2. _____</p>	<p>1</p>		<p>Identify two additional treatments (other than topical) to address with this patient.</p> <p>1. _____</p> <p>2. _____</p>	<p>1</p>	
<p>Patient with incontinence-associated dermatitis as a result of diarrhea and urinary incontinence. Address topical skin care (cleansing and protection).</p> <p>1. _____</p> <p>2. _____</p>	<p>1</p>		<p>Identify two methods of containment of diarrhea.</p> <p>1. _____</p> <p>2. _____</p>	<p>1</p>	
<p>Venous insufficiency ulcer with large volume of drainage</p> <p>1. _____</p> <p>2. _____</p>	<p>1</p>		<p>Identify two (2) other areas to be addressed for the patient with a venous insufficiency ulcer.</p> <p>1. _____</p> <p>2. _____</p>	<p>1</p>	

**Submit completed project to your dropbox

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