

WOUND CARE

QUICK REFERENCE



Ministry of Health Malaysia



National Wound Care Committee
&
Infection Control Unit
Medical Care Quality Section
Medical Development Division
Ministry of Health Malaysia





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**Wound Care Quick Reference
First Edition 2019**

Produced & Distributed by:
Infection Control Unit
Medical Care Quality Section
Medical Development Division
Ministry of Health Malaysia





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FOREWORD

FROM THE DIRECTOR GENERAL OF HEALTH MALAYSIA



Man has been tending to his wounds since the caveman era. It has evolved from potions and magical ointments to a systematic wound care management that we have today. Haruki Murakami, a Japanese writer once said "But we cannot simply sit and stare at our wounds forever". It just goes to say that any wound, be it internal or external needs to be attended to, to ensure it heals. Wound is often seen and dealt with at any healthcare facility within any discipline, and managing it astutely becomes an integral part of providing the best healthcare. As trivial as it may seem, wound care can actually become cumbersome and arduous to manage. Hence, the key lies in choosing the best treatment for each kind of wound based on its appearance and aetiology. This successively leads to reduction in costs and hospital stay but above all curtails the pain and anguish suffered by the patient. So, after coming up with the first edition of the "Wound Care Manual" in 2014, the production of a pocket book for an easy and fast reference guide to wound care materialised. "Wound Care Quick Reference", a pocket sized guide is a simplified and concise version based on the initial manual aimed to assist all healthcare personnel in wound management.

I would like to conclude by recognising the National Wound Care Management Committee and Healthcare Quality Section, Medical Development Division, Ministry of Health for their meritorious effort in the production of this "Wound Care Quick Reference". I hope with this pocket guide, wound care becomes effortless and effective. Thank you.

YBhg. Datuk Dr. Noor Hisham bin Abdullah

PREFACE

FROM CHAIRMAN OF NATIONAL WOUND CARE COMMITTEE



'Healing is a matter of time, but it is also sometimes a matter of opportunity' – Hippocrates. We seized the opportunity to produce this pocket guide book which has unravelled the complexities involved in wound management. Wounds represent a major and escalating public health issue which involves interdisciplinary continuum of care. The synchrony between these numerous disciplines and a strategic approach to caring for these wounds is the key to success. When we assist wounds to heal, we ease the patient's pain and suffering. As care providers, the doctors, paramedics and rehabilitation personnel must stay abreast of the latest developments and dressings available in wound care management. With the birth of this book, we have ventured into making this daunting task simpler and more straightforward to facilitate our fellow comrades in providing their best care for these wound sufferers. We are the soldiers attempting to win the battle alongside our patients at a battle ground called wound. As important as the patient's nutrition and premorbid status is, choosing the right kind of weapon aka dressing ensures victory. Hence, this book was aimed to equip every soldier with the knowledge and tactics of wound management.

In conclusion, managing each wound individually and choosing the best proposed management is key to hastening wound healing. I extend my sincere thanks to the members of the National Wound Care Management Committee and the Infection Control Unit of the Medical Development Division, Ministry of Health for their time and effort in materialising this pocket guide. I hope you enjoy reading this book and above all able to use it to the patient's benefit. Thank you.



Madam (Dr.) Normala Hj. Basiron



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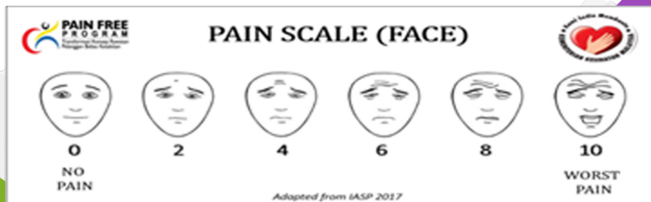
Administrative Clerk
Infection Control Unit
Medical Development Division



GENERAL ASSESSMENT

General Assessment of patient (systemic factor) :

- Management of systemic illness
 - Pain assessment and management
- Its important to assess and manage pain before we embark on local wound assessment and management



ANALGESIC LADDER FOR ACUTE PAIN MANAGEMENT

MILD 1 - 3		MODERATE 4 - 6		SEVERE 7 - 10		UNCONTROLLED
Regular	PRN	Regular	PRN	Regular	PRN	To refer to APS for: PCA or Epidural or others
No medication or PCM 1gm 6hrly	PCM &/or NSAID / COX2 inhibitor	Tramadol 50mg TDS/QID + PCM 1gm QID oral ± NSAID / COX2	Additional Tramadol 50-100mg (max 400mg / day)	Tramadol 50-100mg QID OR Morphine 5-10mg 4hrly SC / IV + PCM 1gm QID ± NSAID / COX2 inhibitor	Morphine 4hrly oral / SC / IV	



LOCAL WOUND ASSESSMENT

Wound algorithm is based on **TIME** principle of wound care

T = Tissue Type

I = Infection

M= Moisture level / Exudates

E = Edge **

* it is also important for you to assess surrounding skin (periwound skin)

** Edge is not included in the Wound Scoring





STEP 1 - IDENTIFY TISSUE TYPE

T
Score: 0

**Necrotic tissue /
slough <25%**



†
Score: 4

**Necrotic tissue /
slough >25%**

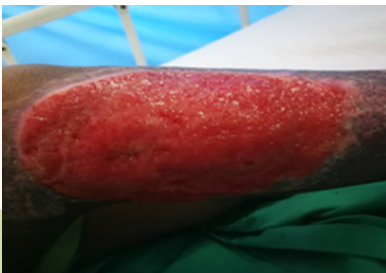




STEP 2- IDENTIFY PRESENCE OF INFECTION

I
Score: 0

NO



i
Score: 2

YES





STEP 3 - IDENTIFY MOISTURE LEVEL OR EXUDATES

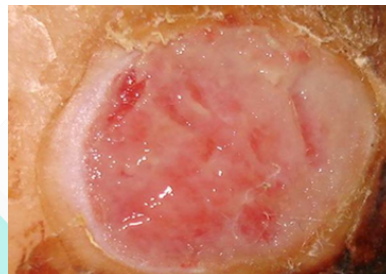
M
Score: 1

Dry / minimal



m
Score: 2

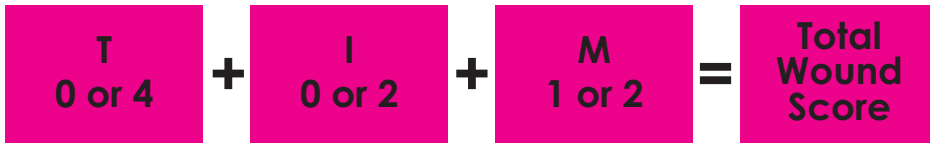
Moderate / wet





STEP 4 - NOW, Either

- a) **DETERMINE YOUR WOUND SCORE**
(Total Wound Score = Wound type)
e.g Score 2 = Wound Type 2



OR

- b) **DECIDE YOUR COLOUR COMBINATION**
(Refer Next Page)





WOUND TYPES ACCORDING TO COLOUR COMBINATION



WOUND TYPE: 1



WOUND TYPE: 2



WOUND TYPE: 3



WOUND TYPE: 4



WOUND TYPE: 5



WOUND TYPE: 6



WOUND TYPE: 7

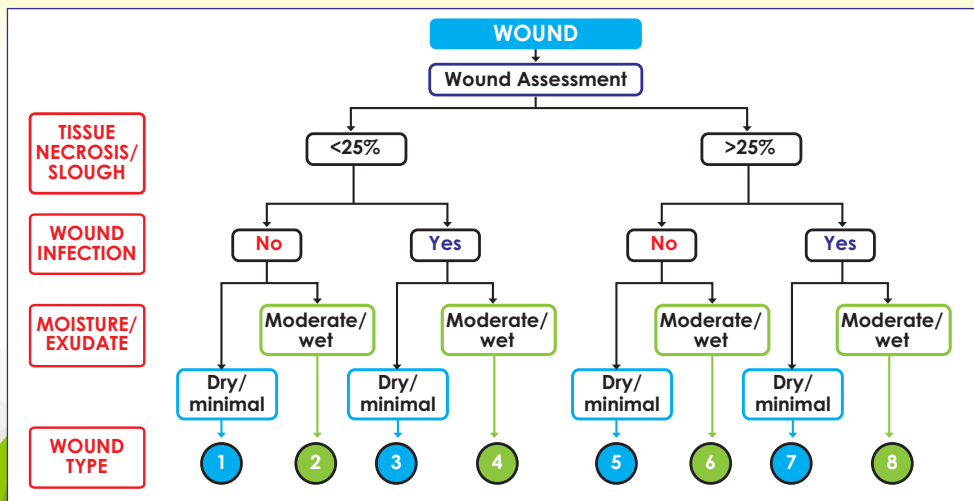


WOUND TYPE: 8



SUMMARY :

WOUND CARE ALGORITHM





STEP 5

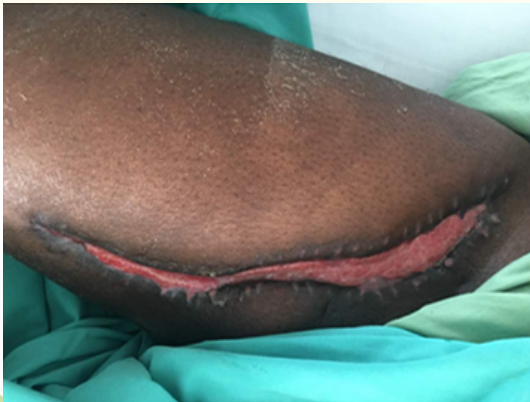
By now you should have decided your wound type, please refer to appropriate page for wound management based on the wound type

Wound Type 1 Refer to page	11
Wound Type 2 Refer to page	13
Wound Type 3 Refer to page	15
Wound Type 4 Refer to page	17
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WOUND TYPE 1



- **Necrotic Tissue / slough <25%**
- **No signs of infection**
- **Dry / minimal exudates**



MANAGEMENT WOUND TYPE 1

Dressing material suggested / recommended

- Foam
- Polymeric membrane
- Island dressing

Antibiotic

No

Surgical procedure suggested / recommended

- Ready for secondary wound closure
- If the wound is small, continue dressing till the wound heals by secondary intention
- Frequency of wound dressing varies depending on type of wound and also dressing material used



WOUND TYPE 2

T I m



- **Necrotic Tissue / slough <25%**
- **No signs of infection**
- **Moderate exudates / wet**



MANAGEMENT WOUND TYPE 2

Dressing material suggested / recommended

- Foam
- Alginate
- Hydrofiber
- Polymeric membrane

Antibiotic

May or may not, based on the underlying cause.

Surgical procedure suggested / recommended

- Find underlying cause
- Treat underlying cause if necessary



WOUND TYPE 3



- **Necrotic Tissue / slough <25%**
- **Presence of infection**
- **Dry / minimal exudates**

MANAGEMENT WOUND TYPE 3

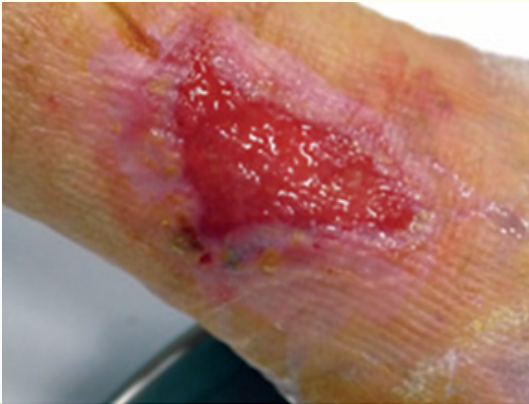
Dressing material suggested / recommended	Antibiotic	Surgical procedure suggested / recommended
<ul style="list-style-type: none">• Tulle*• Hydrogel*• Hydrocolloid• Silver dressing*• Iodine base dressing*• Any secondary dressing**	Yes, based on C&S report of infected tissue	<ul style="list-style-type: none">• Debridement may be needed

*May require secondary dressing

**Options of secondary dressing are Gamgee, gauze, foam, island dressing, etc



WOUND TYPE 4



- **Necrotic Tissue / slough <25%**
- **Presence of infection**
- **Moderate exudates / wet**

MANAGEMENT WOUND TYPE 4

Dressing material suggested / recommended	Antibiotic	Surgical procedure suggested / recommended
<ul style="list-style-type: none">• Alginate*• Foam• Silver*• Hydrofiber*• Polymeric membrane• Iodine base dressing*	Yes, based on C&S report of infected tissue	<ul style="list-style-type: none">• Debridement may be needed.

*May require secondary dressing



WOUND TYPE 5



- **Necrotic Tissue / slough >25%**
- **No signs of infection**
- **Dry / minimal exudates**



MANAGEMENT WOUND TYPE 5

Dressing material suggested / recommended	Antibiotic	Surgical procedure suggested / recommended
<ul style="list-style-type: none">• Hydrogel*• Hydrocolloid• Polymeric membrane• Composite medical grade honey*	No	<ul style="list-style-type: none">• Debridement is needed

*May require secondary dressing



WOUND TYPE 6



- **Necrotic Tissue / slough >25%**
- **No signs of infection**
- **Moderate exudates / wet**

MANAGEMENT WOUND TYPE 6

Dressing material suggested / recommended	Antibiotic	Surgical procedure suggested / recommended
<ul style="list-style-type: none">• Alginate*• Foam• Polymeric membrane• Hydrofiber*	<p>May or may not, based on the underlying cause.</p>	<ul style="list-style-type: none">• Surgical/mechanical debridement is recommended.• May need repeated debridement

*May require secondary dressing



WOUND TYPE 7



- **Necrotic Tissue / slough >25%**
- **Presence of infection**
- **Dry / minimal exudates**

MANAGEMENT WOUND TYPE 7

Dressing material suggested / recommended	Antibiotic	Surgical procedure suggested / recommended
<ul style="list-style-type: none">• Silver dressing*• Hydrogel*• Hydrocolloid• Iodine base dressing*• Polymeric membrane• Composite medical	Yes, based on C&S report of infected tissue	<ul style="list-style-type: none">• Surgical debridement is strongly recommended.

*May require secondary dressing



WOUND TYPE 8



- **Necrotic Tissue / slough >25%**
- **Presence of infection**
- **Moderate exudates / wet**

MANAGEMENT WOUND TYPE 8

Dressing material suggested / recommended	Antibiotic	Surgical procedure suggested / recommended
<ul style="list-style-type: none"> • Alginate* • Hydrofiber* • Foam* • Polymeric membrane* • Iodine base dressing* • Silver dressing* • Charcoal* 	<p>Yes, based on C&S report of infected tissue</p>	<ul style="list-style-type: none"> • Surgical debridement is strongly recommended.

*Require combination or composite antimicrobial dressing (exudate control + antimicrobial)
Charcoal can be used for odour management

REFERENCE

- **Wound Care Manual, 1st Edition, 2014**
- **Pain Scale Template (Ruler) Version 2018**
- **Modified WHO Analgesic Ladder**



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