3M Health Care

Your Essential Solutions

Pressure Ulcer Staging

A pressure ulcer is a localized injury to the skin and/or underlying tissue usually over a bony prominence, as a result of pressure, or pressure in combination with shear and friction.

Suspected Deep Tissue Injury Purple or maroon localized area of discolored intact skin or blood-filled blister due to damage of underlying soft tissue from pressure and/or shear. The area may be preceded by tissue that is painful, firm, mushy, boggy, warmer or cooler as compared to adjacent tissue.

Stage I Intact skin with non-blanchable redness of a localized area usually over a bony prominence. Darkly pigmented skin may not have visible blanching; its color may differ from the surrounding area.

Stage II Partial thickness loss of dermis presenting as a shallow open ulcer with a red pink wound bed, without slough. May also present as an intact or open/ruptured serum-filled blister.

Stage III Full thickness tissue loss. Subcutaneous fat may be visible but bone, tendon or muscle are *not* exposed. Slough may be present but does not obscure the depth of the tissue loss. May include undermining and tunneling.

Stage IV Full thickness tissue loss with exposed bone, tendon, or muscle. Slough or eschar may be present on some parts of the wound bed. Often includes undermining and tunneling.

Unstageable Full thickness tissue loss in which the base of the ulcer is covered with slough (yellow, tan, gray, green or brown) and/or eschar (tan, brown or black) in the wound bed.

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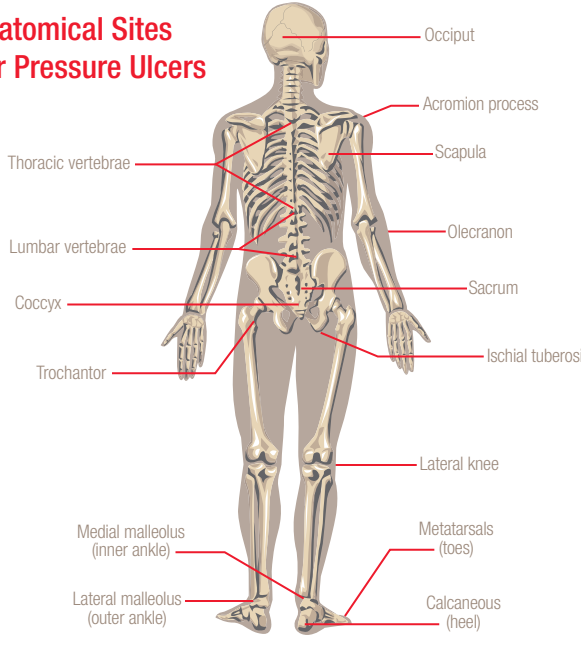
Anatomical Sites For Pressure Ulcers



Assessment Parameters*

- Location
- Dimensions - Length, Width, Depth
- Stage
- Exudate
  - color
  - consistency
  - odor
  - amount
- Condition
  - base
  - surrounding skin
  - sinus tracts/undermining measure
- Infection signs or symptoms
  - local vs. systemic
- Pain

*Cleanse wound before assessment

Plan of Care should include:

Pressure ulcer risk assessment, pressure redistribution, management of nutrition, pain, mobility, moisture, friction and shear, topical wound management, and patient education.

Wound Ostomy and Continence Nurses Society. (2003). *Guideline for Prevention and Management of Pressure Ulcers, WOCN Clinical Practice Guideline Series #2.*

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