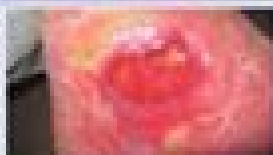
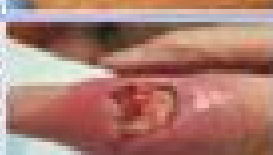


Wound Management Guidelines

	Tissue Type	Phase of Healing	Management Aims	Treatment Options	Remember
Necrotic Slough		Inflammatory Black or yellowish brown tissue	Debridement Caution: where the vascular status is compromised, debridement is not recommended.	- Sharp debridement (skilled) - Hydrogel - Enzymatic - Hydrocolloid - Moisture retentive dressing	Comprehensive wound assessment is the cornerstone of effective wound management practice
		Inflammatory - Yellow layer of tissue - Presence of bacteria and cellular debris - Moderate Exudate	De-slough	- Larval therapy - Enzymatic - Hydrogel - Hydrocolloid - Moisture retentive dressing	
Granulating		Proliferative - New connective tissue - Healthy red wound bed	- Protection - Moist wound healing - Absorption	- Moisture retentive dressing - Hydrocolloid - Hydrofibre - Foam (exudate dependent) - Negative Pressure Wound Therapy	Wound Bed Assessment: T - Tissue I - Infection M - Moisture E - Edge
Epithelialising		Remodelling - Pink bluish tissue - Advancing wound edge - Very fragile tissue	- Protection - Moist wound healing	- Hydrocolloid - Film dressing	
Over-granulation		Proliferative - Excessive granulation tissue - Red	- Reverse over granulation - Refer to doctor or wound team	- Non moisture-retentive dressing - Non - adhesive foam - Anti-inflammatory dressing (silver)	- Signs & symptoms of wound infection: - Redness or excessive swelling - Pain or tenderness - Purulent discharge +/- Foul odour +/- Inflamed lymph nodes +/- Fever +/- Increased CRP
Acute Infection		- Acute inflammatory response - Heat, pain, erythema	Treat infection	- Medical review/management - Wound swab - Antibiotic therapy - Daily non-occlusive dressing	
Chronic Infection		- Chronic inflammatory response - Dull, beefy tissue - Friable	Diagnose and treat infection	- Medical review - Wound swab - Antimicrobial dressing	Document in open wound record chart

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Table of Contents Surgical Wound Care Guidelines

1. Understanding the eBook Surgical Wound Care Guidelines
 - The Rise of Digital Reading Surgical Wound Care Guidelines
 - Advantages of eBooks Over Traditional Books
2. Identifying Surgical Wound Care Guidelines
 - Exploring Different Genres
 - Considering Fiction vs. Non-Fiction
 - Determining Your Reading Goals
3. Choosing the Right eBook Platform
 - Popular eBook Platforms
 - Features to Look for in an Surgical Wound Care Guidelines
 - User-Friendly Interface
4. Exploring eBook Recommendations from Surgical Wound Care Guidelines
 - Personalized Recommendations
 - Surgical Wound Care Guidelines User Reviews and Ratings
 - Surgical Wound Care Guidelines and Bestseller Lists
5. Accessing Surgical Wound Care Guidelines Free and Paid eBooks
 - Surgical Wound Care Guidelines Public Domain eBooks
 - Surgical Wound Care Guidelines eBook Subscription Services

- Surgical Wound Care Guidelines Budget-Friendly Options
- 6. Navigating Surgical Wound Care Guidelines eBook Formats
 - ePub, PDF, MOBI, and More
 - Surgical Wound Care Guidelines Compatibility with Devices
 - Surgical Wound Care Guidelines Enhanced eBook Features
- 7. Enhancing Your Reading Experience
 - Adjustable Fonts and Text Sizes of Surgical Wound Care Guidelines
 - Highlighting and Note-Taking Surgical Wound Care Guidelines
 - Interactive Elements Surgical Wound Care Guidelines
- 8. Staying Engaged with Surgical Wound Care Guidelines
 - Joining Online Reading Communities
 - Participating in Virtual Book Clubs
 - Following Authors and Publishers Surgical Wound Care Guidelines
- 9. Balancing eBooks and Physical Books Surgical Wound Care Guidelines
 - Benefits of a Digital Library
 - Creating a Diverse Reading Collection Surgical Wound Care Guidelines
- 10. Overcoming Reading Challenges
 - Dealing with Digital Eye Strain
 - Minimizing Distractions
 - Managing Screen Time
- 11. Cultivating a Reading Routine Surgical Wound Care Guidelines
 - Setting Reading Goals Surgical Wound Care Guidelines
 - Carving Out Dedicated Reading Time
- 12. Sourcing Reliable Information of Surgical Wound Care Guidelines
 - Fact-Checking eBook Content of Surgical Wound Care Guidelines
 - Distinguishing Credible Sources
- 13. Promoting Lifelong Learning
 - Utilizing eBooks for Skill Development
 - Exploring Educational eBooks
- 14. Embracing eBook Trends

- Integration of Multimedia Elements
- Interactive and Gamified eBooks

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