



PATIENT TEACHING GUIDE:

Wound Care Handbook



 Visiting Nurse Service of New York®

HOME CARE®

We Bring The Caring Home®

PATIENT TEACHING GUIDE:

WOUND CARE



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Introduction

WELCOME TO VISITING NURSE SERVICE OF NEW YORK!

This is a Teaching Guide About How to Take Care for Your Wound

IT WILL:

- Explain wound healing
- Teach you ways to help your wound to heal
- Show you how to care for your wound

Your nurse and your doctor will talk with you about your wound and will answer any questions you may have.

DOCTOR _____

PHONE # _____

NURSE _____

PHONE # _____

TYPE OF WOUND _____

We have tried to answer the questions that most people ask about taking care of their wounds. Knowing about your health condition is an important part of your health care.

We hope this guide will give you a good start towards planning and taking care for your wound.

As you think of other questions, write them down in the “Notes” section at the end of this guide. This can help you remember to ask questions when you talk with your nurse or doctor.

Wounds: Basic Information

What is a Wound (Sore)?

- It is an opening in your skin.
- It is a cut or other injury to a part of the body.

What Caused Your Wound (Sore)?

There are many ways a wound can happen.
Some of them may be:

- Surgery (Operation)
- Pressure
- Poor circulation (Venous/Arterial)
- Loss of sensation (Neuropathy)
- Bums
- Injury

Types of Wounds

There are many types of wounds and to help heal them, your help is needed in taking care of the reason that caused it. For example:

PRESSURE ULCERS

(Sometimes Called Bedsores) – Are caused because there is constant pressure to a part of your body. The constant pressure does not let oxygen go to the area and causes the cells to die.

How Can I Tell if I am Getting a Pressure Ulcer?

You will see a red or darker area that does not go away. Sometimes the area may feel warmer, spongy, or firm.



Poor Circulation:

VENOUS (STASIS) ULCERS

Blood not going back up your leg.
You may have swelling, changes in color, and weeping.

ARTERIAL ULCERS

Blood does not go all the way down to the toes.
You may experience pain while walking, at night or at rest.

MIXED

You can have a combination of both (venous and arterial).

LOSS OF SENSATION (NEUROPATHY)

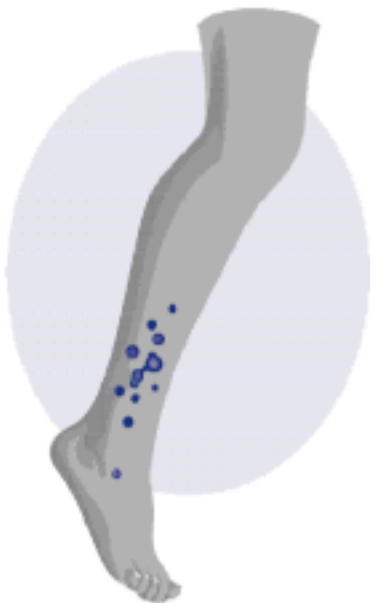
Changes in sensation may occur as a result of other diseases. For example, Diabetes, Stroke, Multiplesclerosis (MS), etc.

SURGERY

You had an operation and due to certain reasons, the doctor has left your wound open to heal slowly from the inside out.

BURNS/INJURY

The wound happened because of an accident.



What is the Skin?

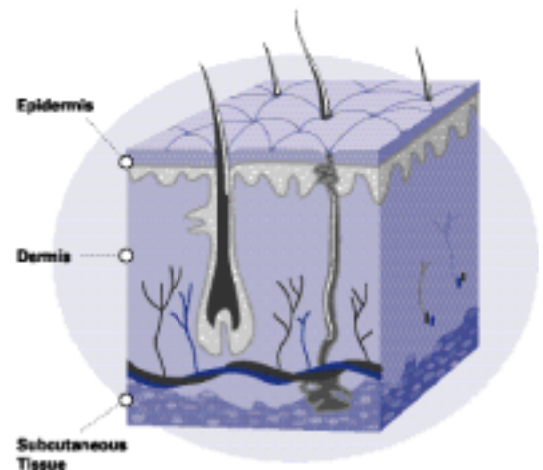
Skin is the Outer Covering of Your Body

IT ALSO HAS SPECIAL FUNCTIONS SUCH AS:

- Protect you from germs entering your body
- Helps to regulate (maintain) your body temperature
- Helps you to feel

The skin is made up of many cells. These cells have special jobs and help to build layers to your skin. Your outermost layer is the epidermis and the layer below that is your dermis. When a wound happens the cells in your skin go into action by:

- Protecting you from germs
- Getting rid of dirt (bacteria) in your wound
- Gathering together to build new layers and fill in the wound.



Healing a wound (sore) is a process that takes time and needs lots of care.

Healing Process

For healing to take place your cells need food, fluids, oxygen and rest. To help heal your wound (sore), you will also need to know what caused your wound and take care of the reason. For example, if your wound was caused by pressure, you will need to take action to get rid of the pressure to the area of your wound.

The time it takes for a wound (sore) to heal depends on different factors. One of the most important factors is your general health. Other factors are:

- Size of the wound
- How deep the wound is
- Reason for your wound
- Care to the wound

FACTORS THAT AFFECT HEALING

- Age
- Infection
- Pressure
- Circulation
- Medications
- Nutrition
- Activity

Superficial and Deep Wounds (Sores)

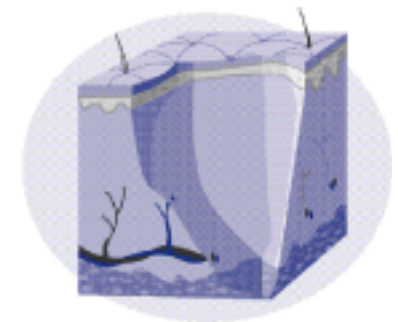
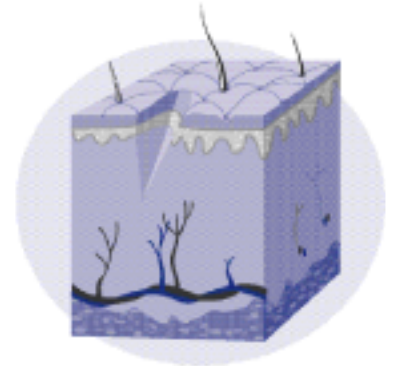
If your wound (sore) is “superficial,” involving the two outer layers (epidermis and dermis) your wound will usually heal fast. If your wound is “deep,” involving more layers, for example, muscle, the healing will take longer to heal.

When the wound is “superficial,” the wound will heal by cells moving across the wound and replace the outermost layer, the epidermis.

When the wound is “deep,” it will take longer to heal because the cells start to fill in from the bottom of the wound. The cells form new tissue that looks light red or pink and looks lumpy and glossy (shiny). As the wound heals, it becomes smaller and drains less.

Sometimes, “deep” wounds are covered with a thick black scab and appear smaller than it really is. This scab can be soft or hard and can be either black, grey-yellow, green-yellow, or yellow. The scab is made up of dead cells that need to come off before any new healing can take place.

Whether your wound is “superficial” or “deep,” your body will need good nutrition for healing to take place. Remember to eat, drink fluids, and to be patient.



Taking Care of Your Wound

Wash Your Hands

- Rub hands with soap and water for 15 to 30 seconds.
- Be sure to wash between fingers and under your nails.
- Rinse well and dry thoroughly.

GET YOUR SUPPLIES

- Have everything you need ready before you begin.

Be sure you are in a comfortable position as you get ready to start taking care of your wound (sore).

REMOVE OLD DRESSING

- Step 1.** Loosen old dressing.
- Step 2.** Place your hand into a small plastic bag.
- Step 3.** Gently take off the old dressing with bag covered hand.
- Step 4.** Turn bag inside-out over the old dressing.
- Step 5.** Close the bag tightly before throwing it in the garbage.

Wash/Irrigate the Wound (Sore)

- **ALWAYS** follow your doctor's instructions for your wound care.
- If you are instructed to use a syringe with a solution, your nurse will show you how to use this device.
- To clean the open wound, pour enough solution to dampen the gauze, then wipe your wound using circular motions from the center of the wound outward. Be sure to clean at least 1" beyond the wound margins.
- Make sure you use a new gauze each time you wipe and discard the soiled one in a plastic bag.
- Dry surrounding skin by patting with a new gauze.

SPECIAL INSTRUCTIONS:

Look at the Wound

Take your temperature once a day before bedtime. Check for bleeding, pus, hardness, swelling, odor and any color change. If any of these are present, please let your nurse or doctor know as soon as possible.

Dressing Your Wound

Apply a new dressing over the wound as instructed by your doctor or nurse.

If you have a tube or drain in your wound or next to your wound, be careful not to pull on it when removing your old dressing. Use a clean, moist gauze to clean the tube. Be sure to clean the tube by cleaning away from the wound.

SPECIAL INSTRUCTIONS ABOUT YOUR DRESSINGS:

REMEMBER TO:

- 3 Use dressings only once.
- 3 Keep dressings in a clean, dry place.
- 3 Throw out the entire dressing if it gets dirty.

CLEAN UP

- 3 Put all your dirty supplies in a double (two) plastic bag.
- 3 Wash your hands.
- 3 Check that you have enough supplies for a couple of days.
- 3 Do not let your supplies run low.

SIGNS TO REPORT**Tell Your Doctor or Nurse if:**

- The wound (sore) gets larger or deeper.
- More fluid drains from the wound.
- The wound does not begin to show signs of healing in 2 to 4 weeks.
- You see signs of infection.

Signs of Infection

INFECTED WOUND

- Thick green or yellow drainage
- Foul odor
- Redness or warmth around wound
- Tenderness of surrounding area
- Swelling

WIDESPREAD INFECTION

- Fever or chills
- Weakness
- Confusion or difficulty concentrating
- Rapid heart beat
- Swelling

Other things
to report are:

- If you cannot eat a well-balanced diet
- If you have trouble following any part of the treatment plan
- If your general health becomes worse
- If you have a temperature

Things You Can Do to Help Heal Your Wound

TAKING CARE OF THE REASON THAT CAUSED YOUR WOUND

SPECIAL INSTRUCTIONS FOR YOUR TYPE OF WOUND:

Nutrition

- Eat a balanced diet and drink fluids.
- Increase protein; take vitamins.

SPECIAL INSTRUCTIONS:

Taking Care of Your General Health

- Keep doctors appointments.

SPECIAL INSTRUCTIONS:

Activity Level

SPECIAL INSTRUCTIONS:

Prevent Infections

- Frequent hand washing

SUPPLIES NEEDED:

ADDITIONAL INSTRUCTIONS:

Preparing Solutions in the Home

Sometimes you will need to prepare a solution ordered by your doctor at home. Just remember to relax and make sure you have the necessary items in your home. If you do not have them at home, they can be purchased at your local supermarket!

Before making the solution, gather all the items you will need.

YOU WILL NEED:

- A glass jar with a tight fitting cover to store the solution
- A measuring cup, measuring spoon, water and the ingredient your doctor ordered
- Wash your hands and wash all the equipment you will need with hot soapy water. Rinse very well.
- Boil all water to be used to make the solution for 20 minutes and let cool before mixing.

NORMAL SALINE (0.9%)

- 2 teaspoons of salt to 4 cups of water
- Store in refrigerator for no longer than 48 hours.
(WRITE THE DATE)

Glossary

Pressure Ulcer: Is tissue damage caused by constant pressure applied to the skin such as from sitting or lying on a hard surface for prolonged periods of time.

Drainage Is the fluid made by the wound. Healthy fluid is clear pink or clear yellow. You need to tell your nurse or doctor if the fluid changes to thick green or yellow and if there is a foul odor.

Infection: Is the build up of extra bacteria in the wound that may slow healing and cause other complications. You need to report changes such as increased drainage, color that is green yellow and thick, foul odor, redness, warmth around the wound swelling and tenderness. Call your doctor and nurse if you have chills, fever, confusion and a rapid heartbeat.

Cleansing/Irrigation: Is the rinsing of the wound by pouring a solution (usually normal saline) over the wound to remove dead cells and the accumulated drainage. Your nurse will show you and your care giver how to clean and rinse the wound. Healing tissue can be hurt if too much or too little force is used. Caution: use only cleansing solutions recommended by your nurse and doctor.

Debridement: Is the removal of dead tissue (necrotic tissue) from the wound. Sharp debridement is when your doctor cuts the necrotic tissue away. Your nurse is able to remove necrotic tissue with a combination of dressings, enzymes and irrigation techniques.

Incontinence: Not able to control the urine or stool, having accidents or getting wet. Caution: clean skin after soiling and apply a moisture barrier to the skin.

Moisturizer/Emollient: These are creams and lotions that have oils that penetrate the skin and make it soft.

Moisture Barrier: Is a thicker paste that usually contains zinc oxide that protects skin from the chemicals in the urine and stool.

Artery: Is a network of tubes that carry fresh blood away from the heart, this blood is rich in oxygen and nutrients and is delivered to the tissues and skin.

Vein: Is a network of tubes that carries used blood from the tissues and skin back to the heart

Revascularization/Femoral Bypass: Is an operation done to replace an artery in the leg so as to bring a constant supply of fresh blood rich in oxygen and nutrients to the leg and foot.

Neuropathy: Nerve ending damage, less feeling in the area especially the feet and toes.

Orthotics: These corrective devices are inserted inside the shoe and are individually molded to your feet. They help maintain proper foot support and help to distribute your body weight evenly.

Compression Bandages: These are bandages that reduce swelling in the legs and help prevent blood and fluid from leaking into the skin

Dorsi-Flex/Foot Exercise: Slowly and firmly point foot toward the floor, then slowly bring back pointing to the ceiling. This exercise helps move blood from the leg toward the heart and reduces swelling. 10 times every hour

Compliance to Prevention or Treatment: This is the most important factor in healing. You and your caregiver must follow all the instructions and take self-help actions. Your nurse will help you to learn and understand the treatment plan.

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Notes



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