## **MINORS**

## **WOUNDS - ASSESSMENT**

## **Types of Wound**









#### Note the length, site, depth and type of wound

- Top left: incision a wound with clean-cut edges caused by a sharp object.
- Top right: abrasion blunt force applied tangentially.
- Bottom left: **laceration** blunt injury causing the skin to tear. Edges are irregular.
- Bottom right: **puncture** penetrating injury from a pointed object. May be deep.



#### Perform an X ray if:

Caused by glass (most glass will be visible on XR).

Caused by metal (all metal except aluminium will be visible).

Puncture wound (these are difficult to explore and require an X ray to exclude foreign bodies).

Possible underlying fracture.

Involvement of a joint.

#### **Check the function of underlying structures**

- Distal Pulses
- Capillary refill time
- Distal sensation
- Distal motor function
- Tendon movements

#### Explore, clean and close the wound

- Anaesthetise the wound with local anaesthetic (document sensory function first).
- Explore the wound to identify damage to underlying structures and foreign bodies.
- Clean the wound thoroughly with normal saline.
- If there is dirt resistant to removal pressure irrigation may help (large syringe attached to a 19 gauge cannula image below).
- Decide how to close the wound (if appropriate).
- Consider the need for tetanus prophylaxis and antibiotic prophylaxis.



## Wounds that require antibiotic prophylaxis

- Penetrating injuries (can't be cleaned effectively).
- Bite wounds.
- Wounds >6 hours old
- Valvular heart disease/post-splenectomy

# Wounds that are inappropriate for exploration in ED:

- Stab wounds to the neck, chest, abdomen or perineum.
- Associated compound fractures requiring surgery in theatre.
- Wounds over suspected septic joints or infected tendon sheaths.
- Wounds with obvious neurovascular/tendon injury requiring repair.

## Wounds that are inappropriate for closure:

- Stab wounds to trunk and neck.
- Neurovascular/tendon/joint injury.
- Wounds associated with crush injury or extensive devitalised tissue/skin loss.
- Heavily contaminated or infected wounds.
- Most wounds >12 hours old.