

Ulcer Differentiation Form



Characteristics of wound types

	Pressure	Incontinence-associated dermatitis	Intertriginous dermatitis	Arterial	Venous	Neuropathic
Location	<ul style="list-style-type: none"> At any site Over bony prominences 	<ul style="list-style-type: none"> Fatty tissue of buttocks Perineum Inner thigh Groin May occur over bony prominence 	<ul style="list-style-type: none"> Intergluteal cleft Skin folds Beneath pannus Beneath breasts Groin crease 	<ul style="list-style-type: none"> Tips of toes Between toes Over phalangeal heads Around lateral malleolus Pressure points from footwear 	<ul style="list-style-type: none"> Medial lower leg and ankle Malleolar area Seldom on foot or above knee 	<ul style="list-style-type: none"> Plantar aspect of foot Over metatarsal heads Under heel Toes Areas of foot exposed to repetitive trauma
Distribution	<ul style="list-style-type: none"> Isolated individual ulcers 	<ul style="list-style-type: none"> Consolidated <i>or</i> Patchy 	<ul style="list-style-type: none"> Mirror image on each side of skin fold 	<ul style="list-style-type: none"> Isolated individual lesions 	<ul style="list-style-type: none"> Isolated individual lesions 	<ul style="list-style-type: none"> Isolated individual lesions
Shape	<ul style="list-style-type: none"> Rounded, craterlike shape Shape of object that caused pressure 	<ul style="list-style-type: none"> Diffuse Kissing ulcer (copy on both sides) Anal cleft between buttocks—linear 	<ul style="list-style-type: none"> Linear 	<ul style="list-style-type: none"> Round Even wound margins Punched-out appearance 	<ul style="list-style-type: none"> Irregular Poorly defined 	<ul style="list-style-type: none"> Well defined Round or oblong
Depth	<ul style="list-style-type: none"> Partial thickness <i>or</i> Full thickness 	<ul style="list-style-type: none"> Partial thickness 	<ul style="list-style-type: none"> Partial thickness 	<ul style="list-style-type: none"> Shallow to deep 	<ul style="list-style-type: none"> Superficial Deep with associated complications 	<ul style="list-style-type: none"> Deep
Wound bed	<ul style="list-style-type: none"> Erythema Slough Eschar Granulation Epithelial Bone Ligaments Tendons 	<ul style="list-style-type: none"> Nonuniform redness Pink/white Perianal redness No necrosis 	<ul style="list-style-type: none"> Mild erythema Inflammation with erosion Oozing Exudation Maceration Crusting 	<ul style="list-style-type: none"> Pale Slough Eschar Epithelial Nongranular Minimal exudate 	<ul style="list-style-type: none"> Red, ruddy, granular Possible slough or eschar Moderate to heavy exudate 	<ul style="list-style-type: none"> Varies Granular Necrotic Pale if coexisting arterial disease
Surrounding skin	<ul style="list-style-type: none"> Varies Nonblanchable erythema 	<ul style="list-style-type: none"> Varies 	<ul style="list-style-type: none"> Maceration Secondary bacterial or fungal infections 	<ul style="list-style-type: none"> Pale Hairless Cyanosis Cool to touch Thin, shiny skin 	<ul style="list-style-type: none"> Dry or wet, thin, scaly skin Lipodermatosclerosis Hemosiderin Firm edema Evidence of healed ulcers 	<ul style="list-style-type: none"> Calloused
Associated findings	<ul style="list-style-type: none"> Pressure and/or shear must be present 	<ul style="list-style-type: none"> Moisture must be present If necrosis occurs, reassess for pressure 	<ul style="list-style-type: none"> Pain, itching, burning, odor Perspiration with or without friction 	<ul style="list-style-type: none"> Absent or diminished pulses Ankle-brachial index ≤ 0.9 Intermittent claudication Resting pain 	<ul style="list-style-type: none"> Diminished perfusion with coexisting arterial disease Dilated superficial veins Dry, thin skin 	<ul style="list-style-type: none"> Diminished or absent sensation in foot Foot deformities Palpable pulses Warm foot