

## Who can perform sharp wound debridement?

By Bill Richlen PT, WCC, DWC, and Denise Richlen, PT, WCC

**N**urses and therapists often wonder if their license permits them to perform sharp wound debridement. Scope of practice varies significantly from state to state, so it's imperative to check your state for specific guidance, but we can address some of the challenges clinicians face in deciding whether they can perform this valuable service for patients.

### Sharp debridement vs. other forms

In general, clinicians can perform wound debridement using mechanical, enzymatic, chemical, biological, and autolytic means as long as their scope of practice includes wound care. These noninvasive forms of debridement aren't highly technical, so they don't require a specific skill set.

In contrast, sharp debridement is an invasive procedure and requires the ability to use scalpels, sharp curettes, and scissors safely and effectively. This type of de-

### Sharp debridement policies and procedures

Facilities should have policies and procedures for sharp debridement. The *policy* should address who can perform it, what qualifications are required, and what level of supervision is needed. The acronym LACEE may be helpful in developing the policy statement:

- **L**icensure
- **A**ccreditation
- **C**ertification or competency
- **E**ducation
- **E**xperience.

Other items to include are whether the procedure needs to be performed under sterile or clean technique, if a signed consent is required from the patient, and the criteria for appropriate documentation.

The step-by-step *procedure* should outline:

- instruments to be used
- pain and bleeding management
- tissue disposal
- proper dressing application upon completion.

The procedure will then promote uniformity among clinicians who perform sharp debridement.

bridement is divided into two types — surgical and conservative. Surgical sharp debridement refers to debriding “into” viable tissue, while conservative sharp debridement refers to “up to” viable tissue.



## Scope of practice

In all states, surgical and conservative debridement fall under the scope of practice for physicians, nurse practitioners, and physician assistants. Physical therapists, physical therapy assistants, occupational therapists, certified occupational therapy assistants, and nurses (both registered nurses and licensed practical/vocational nurses) are allowed to perform conservative sharp debridement in some, but not all, states.

What if you are licensed in a state that doesn't address if you can perform sharp debridement? In this situation, you should use a decision tree or algorithm to determine whether you can proceed. Some questions to ask are:

- Did my wound care training prepare me for debridement and am I competent to provide this service? Remember that in addition to the skill, you need to know how to manage the patient's pain and bleeding.
- Will I be providing this service under the supervision of a prescribing clinician who has expertise in debridement?
- Does my facility allow me to perform this procedure? (See *Sharp debridement policies and procedures*.)

The answers will help you make the best decision for you and your patient.

For more information or examples of policies, email the authors at [cutabove@sharpdebridement.com](mailto:cutabove@sharpdebridement.com). You can also [download a sample policy](#)<sup>A</sup>. ■

Bill Richlen is the owner of Infinitus, LLC, in Santa Claus, Indiana. Denise Richlen is an area manager for Paragon Rehabilitation.

*Note:* This article is intended to provide general information. For specific legal questions, contact an attorney.

### Online Resource

A. [woundcareadvisor.com/wp-content/uploads/2016/07/PP-Debridement-tool.pdf](http://woundcareadvisor.com/wp-content/uploads/2016/07/PP-Debridement-tool.pdf)

# Preparing the wound bed: Basic strategies, novel methods

## Proper preparation promotes optimal outcomes.

By Kulbir Dhillon, NP, WCC



**T**he goal of wound-bed preparation is to create a stable, well-vascularized environment that aids healing of chronic wounds. Without proper preparation, even the most expensive wound-care products and devices are unlikely to produce positive outcomes.

To best prepare the wound bed, you need to understand wound healing physiology and wound care basics, as well as how to evaluate the patient's overall health and manage wounds that don't respond to treatment. (See *Normal wound healing*.)

### Basic wound care: DIME

To choose the right method of wound-bed preparation for a particular wound, first assess your patient's condition, wound history, physical wound characteristics,