

## Appendix K: Documentation: Wound Assessment Tools

### Sample 1) Bates-Jensen Wound Assessment Tool (BWAT)

Source: Bates-Jensen & Sussman (2006). Reprinted with permission.

Complete the rating sheet to assess wound status. Evaluate each item by picking the response that best describes the wound and entering the score in the item score column for the appropriate date.

**Location:** Anatomic site. Circle, identify right (R) or left (L) and use "X" to mark site on body diagrams:

- |                          |                     |
|--------------------------|---------------------|
| _____ Sacrum & coccyx    | _____ Lateral ankle |
| _____ Trochanter         | _____ Medial ankle  |
| _____ Ischial tuberosity | _____ Heel          |
- Other Site: \_\_\_\_\_

**Shape:** Overall wound pattern; assess by observing perimeter and depth.

Circle and gag appropriate description:

- |                        |                           |
|------------------------|---------------------------|
| _____ Irregular        | _____ Linear or elongated |
| _____ Round/oval       | _____ Bowt/boat           |
| _____ Square/rectangle | _____ Butterfly           |
- Other Shape: \_\_\_\_\_



Item	Assessment	Date Score	Date Score	Date Score
<b>1. Size</b>	1 = Length x width <4 sq cm 2 = Length x width 4--<16 sq cm 3 = Length x width 16.1--<36 sq cm 4 = Length x width 36.1--<80 sq cm 5 = Length x width >80 sq cm			
<b>2. Depth</b>	1 = Non-blanchable erythema on intact skin 2 = Partial thickness skin loss involving epidermis &/or dermis 3 = Full thickness skin loss involving damage or necrosis of subcutaneous tissue; may extend down to but not through underlying fascia; &/or mixed partial & full thickness &/or tissue layers obscured by granulation tissue 4 = Obscured by necrosis 5 = Full thickness skin loss with extensive destruction, tissue necrosis or damage to muscle, bone or supporting structures			
<b>3. Edges</b>	1 = Indistinct, diffuse, none clearly visible 2 = Distinct, outline clearly visible, attached, even with wound base 3 = Well-defined, not attached to wound base 4 = Well-defined, not attached to base, rolled under, thickened 5 = Well-defined, fibrotic, scarred or hyperkeratotic			
<b>4. Undermining</b>	1 = None present 2 = Undermining < 2 cm in any area 3 = Undermining 2-4 cm involving < 50% wound margins 4 = Undermining 2-4 cm involving > 50% wound margins 5 = Undermining > 4 cm or Tunneling in any area			
<b>5. Necrotic Tissue Type</b>	1 = None visible 2 = White/gray non-visible tissue &/or non-adherent yellow slough 3 = Loosely adherent yellow slough 4 = Adherent, soft, black eschar 5 = Firmly adherent, hard, black eschar			
<b>6. Necrotic Tissue Amount</b>	1 = None visible 2 = < 25% of wound bed covered 3 = 25% to 50% of wound covered 4 = > 50% and < 75% of wound covered 5 = 75% to 100% of wound covered			
<b>7. Exudate Type</b>	1 = None			

# Bates Jensen Wound Assessment Tool Pdf Ucla

**K Morrison**



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Wound Management for the Advanced Practitioner Terry Swanson, Margo Asimus, Bill McGuiness, 2014-10-21 Increasingly wound management is recognised as a specialised area of practice Advances in wound care products surgical interventions and social support options create an often bewildering array of knowledge for healthcare practitioners This textbook opens with a focus on the core elements of effective wound management an understanding of how wounds heal and what inhibits wound healing rigorous assessment use of outcome measures evidence based approaches to practice and an understanding of how clinical research is done Key aspects of wound bed preparation and management diagnostic investigations assessment and management of non viable tissue infected wounds dressings and technology pharmacological therapy and acute wounds are then elucidated Optimal management of commonly encountered wounds venous leg ulceration arterial and mixed arterial venous ulceration inflammatory ulcers pressure injury and the high risk foot and unusual wounds is described The path to professionalisation of wound management in Australia is charted The book ends with a list of wound care products types properties uses distributor contact details The editors of and specialist contributors to this text have aimed to build on the foundations provided by the numerous basic introductory level textbooks in the field to provide an authoritative comprehensive and up to date textbook for wound managers who wish to further develop their knowledge and skills **Text**

**and Atlas of Wound Diagnosis and Treatment** Rose Hamm, 2014-10-22 A UNIQUE COMBINATION TEXT AND FULL COLOR ATLAS OF WOUND MANAGEMENT Text and Atlas of Wound Diagnosis and Treatment delivers outstanding visual guidance and clear step by step instruction on caring for patients with wounds Utilizing more than 700 full color illustrations and clear concise text this unique learning text also includes complete discussion of evidence based concepts of wound treatment Text and Atlas of Wound Diagnosis and Treatment is logically divided into four sections Integumentary Basics which covers fundamental topics such as anatomy and physiology of the integumentary system and acute and chronic wound healing Wound Diagnosis which discusses specific disorders such as vascular wounds lymphedema pressure ulcers diabetes burns and more Wound Bed Preparation which details debridement and dressings Biophysical Technologies which includes electrical stimulation negative pressure pulsed lavage with suction hyperbaric oxygen ultraviolet and low level laser therapy Text and Atlas of Wound Diagnosis and Treatment is enhanced by learning aids such as chapter objectives NPTE style review questions at the end of each chapter and case studies which give real world application to the principles and techniques discussed in the book Entry level students in all medical professions doctors podiatrists physician assistants nurses physical therapists and occupational therapists will find this an essential text for understanding the multi disciplinary approach to caring for patients with wounds Registered Nurse, 2007 *Essentials of Physical Medicine and Rehabilitation E-Book* Walter R. Frontera, Julie K. Silver, Thomas D. Rizzo, 2014-08-04 From sore shoulders to spinal cord injuries Essentials of Physical Medicine and Rehabilitation 3rd Edition provides you with the knowledge you need to get your patients moving

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**Management chronických ran** Hlinková Edita, Nemcová Jana, Huľo Edward, a kolektiv, 2019-03-07 Publikace je určena pro zdravotnické profesionály kteří ošetřují pacienty s nehojícími se ranami v nemocnicích v domcích i v zařízeních sociálního sloužeb a v hospicích Konkrétně jsou v monografii zahrnuty dekubity ulcus cruris syndrom diabetické nohy maligní a sororigenní způsobené sestrou a její

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