WOUND CARE

WOUND HEALING TECHNIQUES

· Primary Closure (Primary Intention): closing the wound as close to the day of injury

· Se condany Intention: wound heals on its own w/ minimal assistance (maybe steristrips).
· Third Intention (aka Delayed Primary Closure): wound is left open and primary intention is done after a delay.

Phase 1 Day 1-3

Primary Closure - Inflammatory Response

· Tissue is dependant on closure material to hold appreciation (no collagen there).

- 11. Sutures

Phase 11

1-2 Weeks

Matration

· Collagen deposition occurs and

Phase IIII

Materation / Remodeling Day 14- completely healed

· Fibrous tissue is deposited in making scara.

* If infection or too much tissue has been teared away (ie. chainsaw injury), there might not be enough skin to close the wound, so primary doscreting might not be an option. You shouldn't close nonviable skin.

· Wornd's healed by the inside out (aka secondary Intention) heal very slowly. Dog bites are usually left open blc of infection risk.

Third intention is essentially for nonviable tissue being replaced (ic. skin graft).

Typically 4-6 days post-injury.

· Delp wounds should be closed in layers.

Dead space in

No dead space; closed in layers

WOUND CLOSURE PRINCIPLES

* Avoid infection w/ copious irrigation.

* Flinninate dead spaces by closing in layers Dead space allows serum or blood to collect.

* Avoid unnecessary tension on the wound -> can lead to ischemia. For syture can break.

* Timing - timing for primary closure is up to 24h, and that 24h is more for clean, facial lacerations.

TYPES OF ADHESIVES:

- · Tissue Adhesive (Dermahond)
- Indications:
 - · Tension-free wound
 - · Sports injuries to control bleeding
- Contraindications
 - · High-tension wounds
 - · Areas with hair
 - · Wet areas (blood, sweat, drook, inside morth or around eyes)
- Can get wet briefly so showers are ok. - Dermabond will full off on its own ~5-7d later.

· Staple Closure - Indications:

· Straight lacerations on scalp, trunks or extremities.

- Contraindications:

· Face, hands, or foot wounds. · Irregular edges or deep wounds

- 15 painfil so need local unesthesia.

SUTURE MATERIALS:

· Monofilannents (nylon, polypropyline, etc)
- less likely to get infected.
- knots will slip more likely - need to put more knots.

· Multi hlament (rope, silk, etc) -> braided naterial

- knots held better

- More likely to harbor infection in between braiding.