# Wounds, dressing, bandage, fixing, injury of hands, legs

## WOUND CLASSIFICATION AND ITS MANAGEMENT

WOUND It is a circumscribed injury which is caused by an external force and it can involve any tissue or organ. (surgical and traumatic/accidental).

INJURY It is caused by external noxa that causes cellular and/or tissue trauma and dysfunction. External noxa: mechanical, chemical, radiaton or combination of them.

## WOUND CLASSIFICATION AND ITS MANAGEMENT

#### I. Mechanical:

- 1. Abraded wound (vulnus abrasum)
- 2. Puncured wound (v. punctum)
- 3. Incised wound (v. scissum)
- 4. Cut wound (v. caesum)
- 5. Crush wound (v. contusum)
- 6. Torn wound (v. lacerum)
- 7. Bite wound (v. morsum)
- 8. Shot wound (v. sclopetarium)

### II. Chemical:

- 1. Acid
- 2. Base
- III. Wounds caused by radiation
- IV. Wounds caused by thermal forces:
- 1. Burning
- 2. Freezing
- V. Special

# 1. Abraded wound (v. abrasum)

Superficial part of the epidermal layer

Blunt trauma

➤ Mild

Good wound healing



# 2. Punctured wound

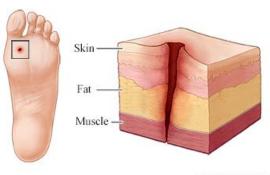
Sharp-pointed objectSeems negligible

### BUT

 Anaerobic infection
 Injury of big vessels, parenchimal organs, nerves
 In thorax - pneumothorax
 X-ray! –foreign body
 Wound healing process is bad.



shutterstock.com · 677035633

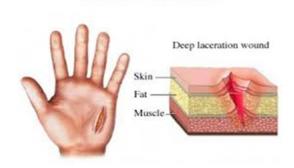


© Healthwise, Incorporated

# 3. Incised wound

Sharp object

- Wound edges even, wound corner – narrowing
- No strong destruction but check the wound base
- Best healing
- Surgical wound



**INCISED WOUND** 





# 4. Cut wound

Sharp object + blunt additional force

More serious destruction

Foreign body - textile

Edges – even or uneven, open edges

Bad wound healing

# 5. Crush wound

Blunt force

- Pressure injury connective tissue and fat
- Edges uneven and torn
- Bleeding not remarkable
- In the wound cavity:
- blood and destructed tissue
- Wound stupor
- Bad wound healing





CRUSHED WOUND-caused by blunt traumadue to run over by vehicle, wall collapse, earth quakes or industrial accidents.severe haemorrhage, death of tissues and crushing of blood vessels.

# 6. Torn wound

➢Great tearing or pulling

- Incomplete or complete amputation
- Uneven wound edges, ragged wound wall
- Strong bleeding!
- Foreign body! Contamination
- Bad wound healing



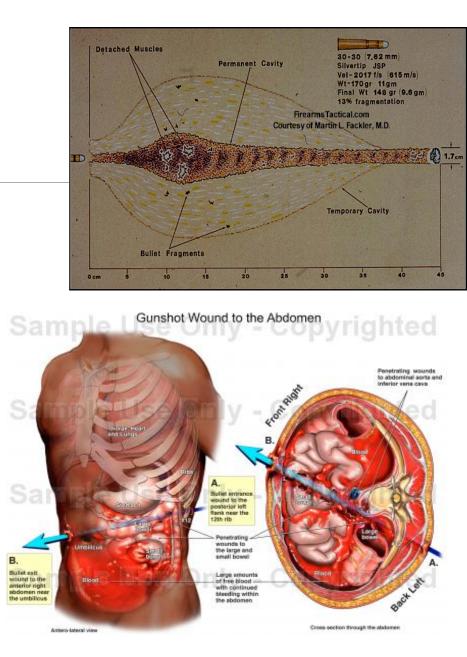
# 7. Shot wound

Close - burn injury

Foreign materials (oil, metal, smut)

## Inlet smaller than outlet,

forensic issue



# 8. Bite wound

- Damage depends on the teeth (animal) and the bite force
- Ragged wound
- Crushed tissue
- > Torn
- Puncured
- Bone fracture
- Severe infected wound
- Prevention of rabies
- Fetanus profilaxis



#### **BITE WOUND--CONTAMINATED**

HUMAN BITE

ANIMAL BITE





# Amputation

What to Do:

Recover the amputated part and whenever possible take it with the victim

- To care for the amputated body part:
  - The amputated part does not necessarily need to be cleaned
  - Wrap the amputated part with a dry sterile gauze or other clean cloth
  - Put in a plastic bag or other waterproof container
  - Keep the amputated part cool, but do not freeze
    - Place the bag or container with the wrapped part on a bed of ice

# **Basic First Aid for Wounds nursing**

What to Do:

Wear gloves (if possible) and expose wound

1. Control bleeding

2. Keep clean wounds-dressing and bandage

- To prevent infection
- Wash shallow wound gently with soap and water
- Wash from the center out / Irrigate with water

3. Immobilise injured part of body-<u>fixing</u>- to prevent movement at the site of injury

# **Control of bleeding**

Capillary bleeding-oozing (open or closed-bruise)

Venous bleeding- big but not pulsatile

Arterial bleeding- pulsatile

First aid-<u>direct pressure</u> (over a sterile dressing), with hand or bandage, if possible lift the arm

-tourniquet?



## DO NOT remove the bloodsoaked pad

It will also remove the platelets closing the wound!



## Bandaging - covers all 3 functions

Act of making effective bandage/ing has 3 parts

- 1. putting dressing
- 2. putting bandage
- 3. putting tape

# 1. Dressing

A dressing is anything designed to be in direct contact with the wound (something to cover the would directly), which makes it different from a bandage, which is primarily used to hold a dressing in place.

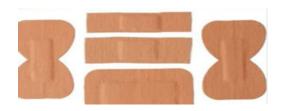
The purpose of a dressing is to:

- Control bleeding
- Prevent infection and contamination
- Absorb blood and fluid drainage

# 1. Dressing

Absorbent Pad

- This part is necessary to prevent infection and reduce "stickage"
- any absorbent material that is clean and lint free is fine
- Gauze
- Plasters-small wounds







# 2. Bandages

Bandage can be used to:

- Hold a dressing in place over an open wound
- Prevent or reduce swelling
- Provide support and stability for an extremity or joint-fixing

Beware of not strangulate the limb (put one or two fingers under the bandage)

# 2. Bandages

Gauze bandage (roller bandage) for all parts of body

Compression bandage (elastic) mostly for limbs

Triangular for limbs and head

Tubular bandages-for digits

## Bandaging

Bandages have three key uses: applying pressure to bleeding wounds; covering wounds and burns; and providing support and immobilization for broken bones, sprains, and strains. These includes gauze, triangular, Elastic, and tubular bandage.



# 2. Bandages

BASIC BANDAGING FORMS

Each bandaging technique consists of various basic forms of bandaging.

The following five basic forms of bandaging can be used to apply most types of bandages:

- 1. circular bandaging
- 2. spiral bandaging
- 3. figure-of-eight bandaging
- 4. reverse spiral bandage

# 3. Tape

Tape to secure the bandage

Adhesive-plaster, clasp, elastic bandage

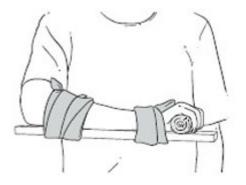




# Fixing-immobilising of wound or other injury

The aim is to prevent movement at the site of injury-it could increase pain, damage, bleeding

To arrange comfortable transport to hospital



superficial - as already mentioned

soft tissue injury-ligaments and muscles

- dislocation-displacement of a bone at a joint
- fractures-break or a crack in a bone
  - open or closed

What to do:

- stop bleeding, prevent infection
- prevent movement at the site of injury and arrange comfortable transport to hospital
- do not let the patient anything to eat or drink (if surgery will be needed)

What to Look for:

- General signs and Symptoms:
  - Tenderness to touch.
  - Swelling.
  - Deformities may occur when bones are broken, causing an abnormal shape.
  - Open wounds break the skin.
  - Loss of use.

Additional signs and symptoms include:

The history of the injury can lead to suspect a fracture whenever a serious accident has happened

The victim may have heard or felt the bone snap.

Soft tissue first aid-what to do?

R-rest the injured part

I- ice or cold compress

C-compress the injury

E- elevate the injury

- ► There are two categories of <u>fractures</u>:
  - Closed fracture
    - the skin is intact
  - Open fracture
    - the skin over the fracture has been damaged or broken and bone may be visible
    - the bone may not always be visible in the wound !!!
      high risk of infecton





## Open fracture

## Closed fracture



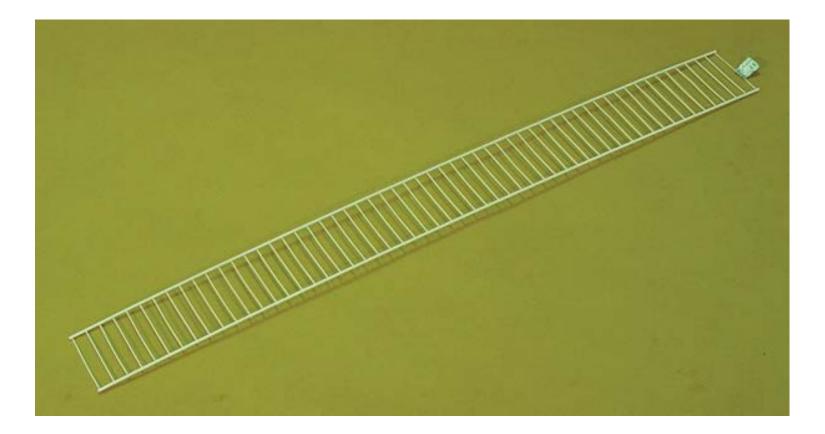
Dislocation

# Injury of hands and legs – first aid

- If the fracture is open, cover the wound by sterile dressing, DO NOT remove any bone fragments or foreign bodies from the wound
- Immobilisation of broken limb 2 joints (upper and lower to the injury) must be immobilised
- Every 15 minutes check if immobilised limb if perfused (temperature, colour)

Raise the limb

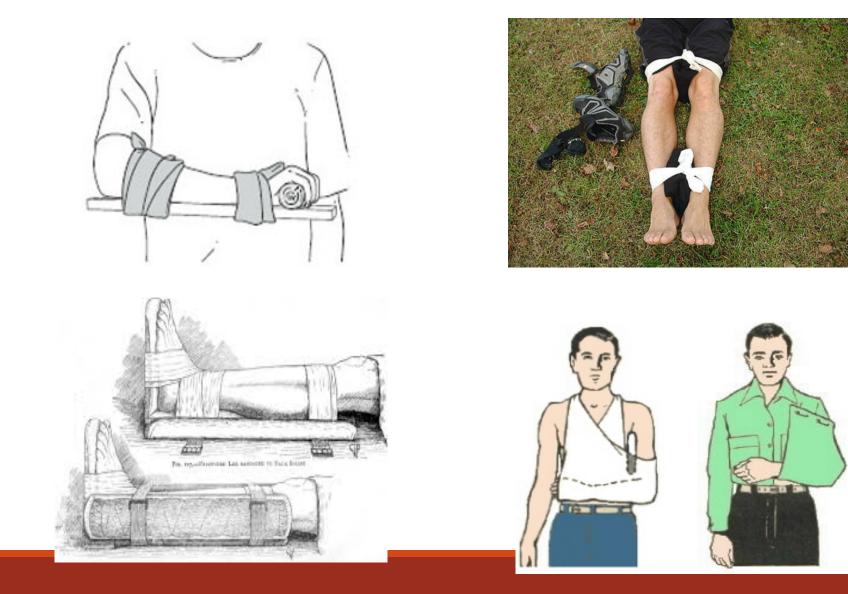
## Kramer splint



Fixing –

use 2 joints /upper and lower to the injury/

use other not injured part of the body /other leg, or chest for upper extremity/















# Thank you.