Wound Care

Integumentary System | NGN NCLEX 2026

1 — DEFINITION & OVERVIEW

- Wound care involves assessing, cleaning, and dressing tissue injuries to promote healing and prevent infection
- Wound healing occurs by **first intention** (edges approximated — sutures/steri-strips) or **second intention** (wound left open — heals by granulation)
- The nurse's goal: maintain a clean, healing environment while protecting surrounding skin and preventing complications

2 — WOUND TYPE DEFINITIONS

- **Contusion** — bruise (internal injury, no break in skin)
- **Laceration** — cut (break in skin integrity)
- **Debridement** — removal of necrotic (dead) tissue from a wound

Injury → Inflammation → Granulation → Remodeling

3 — SIGNS & SYMPTOMS / RED FLAGS

NORMAL HEALING

- Mild redness at edges
- Serous or serosanguineous drainage
- Wound edges approximating

INFECTION SIGNS

- Purulent drainage
- Erythema, warmth, swelling
- Fever, increased pain
- Saturated dressing

Saturated dressing = bacteria travel to wound via capillary action — change immediately

4 — DRESSING TYPES & WOUND SUPPLIES

- **Occlusive dressing** — airtight & watertight seal; prevents germs from entering
- **Montgomery straps** — permit dressing changes without tape; protects skin from repeated tape removal
- **Penrose drain** — advanced by pulling out 1 inch; cut excess length after advancing
- **Wound drain purpose** — removes secretions so healing can occur beneath
- **Tincture of Benzoin** — applied to skin before tape to protect and improve adhesion
- **Suture removal** — generally by day 7

5 — PRIORITY NURSING INTERVENTIONS

- **First action after removing soiled dressing:** wash hands, put on sterile gloves
- **Clean wound starting at incision, moving outward** (center to periphery — never drag back)
- **Leave wound open to air** to eliminate dark, warm, moist conditions that promote infection
- **Remove tape toward the wound** (not away from it)
- **Avoid dressing changes at mealtime** — odors and sights are disturbing
- **Use water-soluble lubricant** on suppositories and gloves for rectal insertions

Always wash hands FIRST after removing a contaminated dressing — before anything else

6 — WOUND HEALING METHODS (DETAILED)

FIRST INTENTION

SECOND INTENTION

Edges held together → **Sutures / Steri-strips**

- Minimal scarring
- Clean surgical wounds
- Fastest healing

Wound left open → **Granulation tissue fills**

- Infected or large wounds
- More scarring expected
- Slower, monitored healing

7 — NCLEX TEST TRAPS ⚠

Trap 1: Removing tape "away from the wound" — WRONG. Always pull tape *toward* the wound to minimize tension on healing tissue.

Trap 2: Cleaning wound from periphery inward — WRONG. Always clean *from the incision outward* to avoid dragging contaminants to the wound center.

Trap 3: A saturated dressing is "OK if it's not leaking" — WRONG. A saturated dressing allows bacteria to travel inward by capillary action. Change it immediately.

Trap 4: Confusing first vs second intention. First = closed with sutures. Second = left open to granulate. NCLEX may ask which applies to an infected wound (second intention).

Trap 5: Sutures are removed "when the wound looks healed" — WRONG. General rule is *day 7*, regardless of appearance.

8 — CLINICAL JUDGMENT (NCJMM)

RECOGNIZE CUES	ANALYZE CUES	PRIORITY ACTION	EXPECTED OUTCOME
Saturated dressing, purulent drainage, fever, wound dehiscence	Infection likely; wound not healing by first intention; capillary action risk	Wash hands → sterile gloves → change dressing → notify physician if infected	Clean wound edges, minimal drainage, no signs of infection within 48–72 hrs

9 — MEMORY BOOSTERS

WOUND CLEANING DIRECTION
"Start at the **CENTER** work your way **OUT**" — like ripples on a pond. Clean spreads outward, not inward.

TAPE REMOVAL
Pull tape **TOWARD** the wound — think of hugging the wound, not pulling away from it.

OPEN AIR = 3 ENEMIES GONE
Leaving wound open eliminates: **Dark** + **Warm** + **Moist** = no bacteria paradise.

SUTURE DAY RULE
Sutures out by day **7** — think "lucky 7" or "1 week to heal and reveal."

FIRST VS SECOND
First = Sutured shut (fastest) | **Second** = Stays open, fills with granulation (slowest, infected wounds)

MONTGOMERY STRAPS
Frequent dressing changes? → **Montgomery** = No tape needed. Protect that skin!