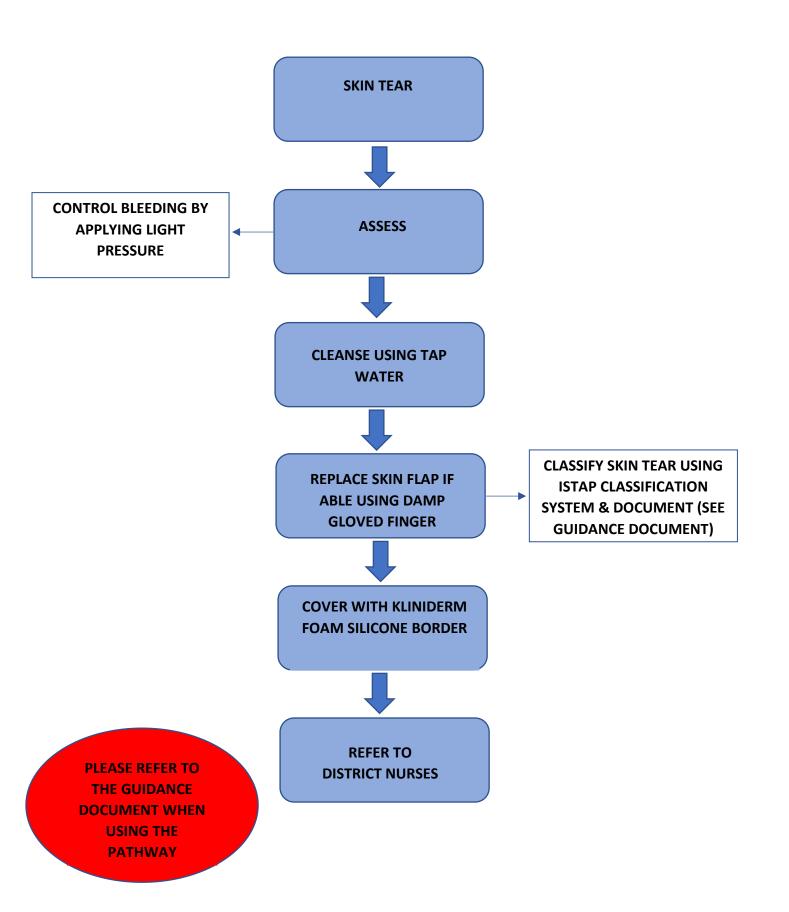


# <u>Skin Tear Pathway – Version 2</u>

For care leaders in Residential Homes





### **Guidance**

### Confirm this is a skin tear

Classify the skin tear as type 1,2 or 3 dependent on the degree of flap loss.

Type 1:

No Skin Loss Linear or Flap Tear which can be repositioned

to cover the wound bed

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Type 2:

Partial Flap Loss Which cannot be repositioned

to cover the wound bed



Type 3:

Total Flap Loss exposing entire wound bed





#### When do you need to escalate to 111?

- Injury larger than the largest dressing
- Unable to stop bleeding
- Unable to remove foreign body
- Wound is visibly deeper than a skin tear
- Beyond your competence to manage



- > Once the dressing is applied, draw an arrow on it to show the direction in which it should be removed. This should be with the direction of the skin flap so that it isn't pulled back on removal.
- > Date the dressing on application as it should be left in place for 7 days.
- Refer to the District Nurses via the Single Point of Access for them to take over management of the wound





## **Skin Tear Box Contents**

- 1 x Box 7.5cm x 7.5cm Kliniderm Foam Silicone
- 1 x Box 10cm x 10cm Kliniderm Foam Silicone
- 1 x S/M Dressit Sterile Dressing Pack
- 1 x M/L Dressit Sterile Dressing Pack
- 1 x Sharpie Marker Pen
- 1 x Wound Measure Tapes
- Kliniderm Foam Silicone dressings & Dressit sterile dressing packs can be obtained from your local District Nursing Team.