ADVANCED WOUND MANAGEMENT

SUTURING #3 Patient Education, Follow Up, & Documentation

OBJECTIVES

- Accurately document wound closure procedure
- State two pertinent patient education recommendations regarding wound closure care
- Verbalize two legal risks of wound closure and the role of the APN

Procedure Documentation

- Initial wound assessment
  - Location, measurements (length, width, depth), condition, exploration (tendons, fb's)
- Cleansing techniques/irrigation and length of time or quantity of solution
- Suture material used, type and quantity of sutures placed, layers of closure
- Post suture status of wound, bleeding, condition, neurovascular status, patient tolerance
- Post repair care: dressing type applied, medications, teaching

Patient Education & Considerations

- Keep wound clean and dry for 72 hours
- May wash with soap and water and then pat dry
- No soaking/submerging
- No lotions or creams to the laceration while sutures are in
- Dressing remains on while still oozing or if in area needing protection from irritation
- Wound Monitoring: redness, swelling, bleeding, discoloration, warmth, increasing pain, changes in sensation
- Scarring
- Splinting
- Suture Removal
- Tetanus
- Antimicrobial Prescribing
- Follow up and Referrals

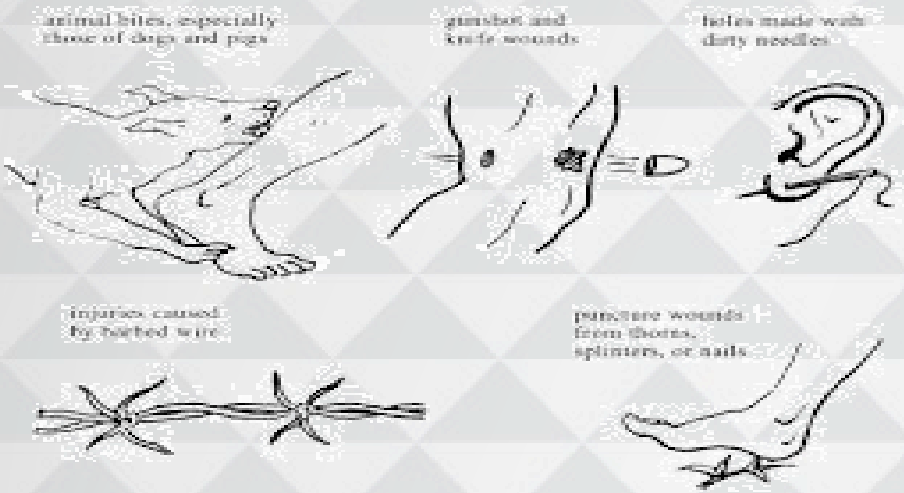
Tetanus Prophylaxis (Immunization history!)

Tetanus Prone Wounds

- > 6 hours old
- > 1 cm depth
- Avulsion, stellate, flap
- Crush, burn, missile
- Devitalized tissue
- Contaminated

Non-Tetanus Prone

- < 6 hours old
- < 1 cm depth
- Linear
- Sharp, incised
- Healthy Tissue
- Non contaminated



Antimicrobial Prescribing

Indications

- Bites
- Delayed closures
- Bites
- Dirty wounds
  - Bacteria laden
  - Much visible material
- Mammalian bites
- Gulf/standing water
- Traumatic wounds
- Compromised host
- Wounds entering joints (refer out, IV abx)
- High risk wounds or person

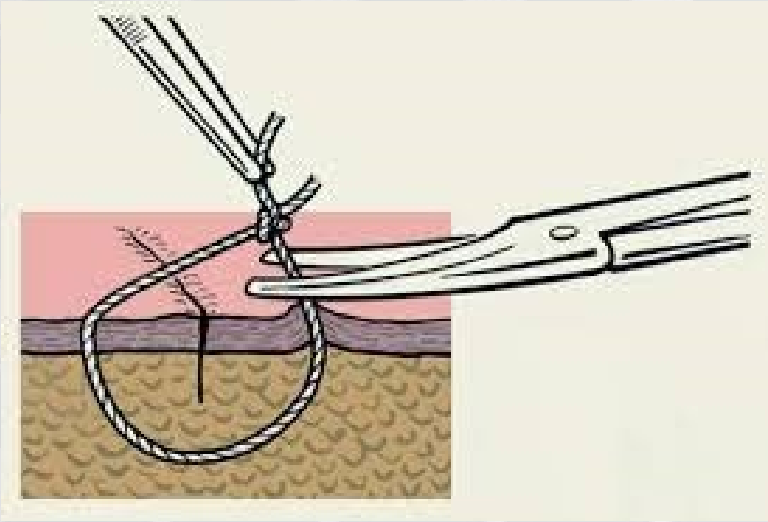
Pathogens

- Staph Aureus: most common
- Streptococci
- Proteus
- Klebsiella
- Pseudomonas
- Pasteurella Multocida
- Eikenella Corrodens
- Vibrio

- Use SANFORD Guide to Antimicrobial Therapy

Suture Removal V 058.3

- Face: 3-5 days
- Ear: 4-6 days
- Neck: 4-6 days
- Scalp: 6-7 days
- Chest or Abdomen: 7-10 days
- Arms and back of hands: 7-12 days
- Legs and top of feet: 10-14 days
- Back: 10-12 days
- Palms & Soles: 7-14 days



Coding Laceration Repair

- CPT Codes
  - 12001-07 Simple repair, superficial wounds; scalp, neck, axillae, external genitalia, trunk, extremities
  - 12011-18 Simple repair, superficial wounds; face, ears, eyelids, nose, lips, or mucous membranes
  - 12031-37 Intermediate repair with layer closure; scalp, axillae, truck, extremities (not hands or feet)
  - 12041-47 Intermediate repair with layer closure; neck, hands, feet, external genitalia
  - 12051-57 Intermediate repair with layer closure; face, ears, eyelids, nose, lips, or mucous membranes

Legal

- REFER lacs that involve amputation, artery, cranial nerves, tendons, ligaments, broken bones, or loss of blood supply to the area
- Consult with a physician for delayed closures or wounds involving joints
- Do not suture cartilage