



# Triangle of Wound Assessment

## Initial assessment form

### Patient label

(patient ID / age / gender)

1 form for each wound

### Wound specific

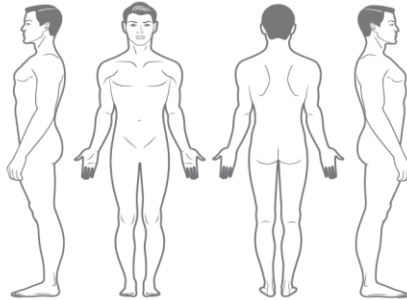
Wound type

- Pressure ulcer category \_\_\_\_
- Leg ulcer
- Foot ulcer
- Skin tear
- Moisture lesion
- Surgical wound
- \_\_\_\_\_

Date occurred \_\_\_\_ / \_\_\_\_ (month/year)

Wound healed \_\_\_\_\_  
(complete when wound has healed)

Wound location (please circle)



Total n° of wounds \_\_\_\_



### Patient specific

Underlying disease factors

- Obesity
- Smoking
- Excessive alcohol
- Bad mobility
- Malnutrition
- Diabetes
- Incontinence
- General infections
- Immunosuppressed
- Palliative
- Dermatological
- Anaemia
- Stroke
- Cardio/Vascular

Medications

- Biologics (Lantus/Humira/Remilade)
- Anticoagulants (Warfarin)
- Steroids (Prednisolone)
- Chemotherapy
- High-dose anti-inflammatory (Ibuprofen / Naproxen)
- Antibiotics

Allergies: \_\_\_\_\_

Sensitivity to dressings: \_\_\_\_\_



### Wound Bed

Dimensions

Length \_\_\_\_ cm

Width \_\_\_\_ cm

Depth \_\_\_\_ cm

Tissue type

Necrotic  \_\_\_\_ %

Sloughy  \_\_\_\_ %

Granulating  \_\_\_\_ %

Epithelialising  \_\_\_\_ %

Other  \_\_\_\_ %

Exudate level

Dry

Low

Medium

High

Exudate type

Clear / healthy

Thin / watery

Thick / purulent

Pink / red

The wound has been swabbed \_\_\_\_ (date)

Signs of local infection

Increased pain

Erythema

Oedema

Local warmth

Increased exudate

Delayed healing

Friable granulation

Wound odour

Pocketing

Systemic infection

Increased erythema

Pyrexia

Abscess / pus

Wound breakdown

Cellulitis

General malaise

Raised WBC count

Lymphangitis



## Wound Edge

- Healthy
- Maceration
- Dehydration
- Rolled edges
- Raised edges
- Tunnelling
- Undermining



Please mark position and extent of any undermining



## Peri-wound

- Healthy
- Maceration
- Excoriation
- Dry skin
- Hyperkeratosis
- Callus
- Eczema

## Quality of Life

- Constant wound pain \_\_\_\_\_ (0-10)
- Pain at dressing change \_\_\_\_\_ (0-10)
- Impact on sleep \_\_\_\_\_
- Impact on mobility \_\_\_\_\_
- Impact on eating \_\_\_\_\_
- Impact on hobbies \_\_\_\_\_
- Impact on social life \_\_\_\_\_
- Impact on emotions \_\_\_\_\_
- \_\_\_\_\_

## Management goals

- Remove slough
- Remove necrosis
- Manage wound exudate
- Rehydrate wound bed
- Protect healthy tissue
  
- Improve wound edge
- Improve peri-wound
- Protect healthy skin
  
- Palliative care
- Relieve pressure
- Manage wound pain
- Manage local infection
- Manage systemic infection

## Treatment plan

- Anti-microbial dressing on the wound
- Antibiotics
- Full lower limb assessment

Products used on the wound (name all):

\_\_\_\_\_  
\_\_\_\_\_

Referral to specialist (date)

- TVN \_\_\_\_\_  Dermatology \_\_\_\_\_
- Podiatry \_\_\_\_\_  Vascular \_\_\_\_\_

Information provided (verbal or written)

- Management goals
- Treatment plan
- \_\_\_\_\_

Next assessment \_\_\_\_\_

## Signing

Last name: \_\_\_\_\_ Date: \_\_\_\_\_ Signature: \_\_\_\_\_