

SHARP WOUND DEBRIDEMENT IN HOME SETTING

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Pressure injury wound healing is complicated and related to different extrinsic and intrinsic factors. Although there is numerous research work that investigates the performance of pressure injury preventive devices and treatments, there is still a lack of information or studies on the wound healing progress of unstageable pressure injury in elderly with an unstageable sacral pressure injury and treated through sharp debridement by community nurse at home instead of by physician in hospital. This case study is important as it provides detailed information on advanced practice in Hong Kong nurse.

Aim: The abstract examines the management of a patient discharged from hospital and returned home with wound debridement required.

Method: The case study presents the efficacy of conservative sharp wound debridement by community nurse in home setting.

Case study: Mrs. L was an 80-year-old bedridden elderly, admitted to hospital with chest infection for a month. On discharge she was found to have a large necrotic pressure injury on her sacral areas. It was 10cm x 10cm and comprised 80% devitalized tissue (Figure 1).

The extent of tissue damage could not be confirmed as it was obscured by devitalized tissue, so it was classified as 'unstageable' (EPUAP & NPUAP 2016).

Fig. 1 (Day 0)



Fig. 2 (Day 7)



Fig. 3 (Day 30)



Fig. 4 (Day 90)



In addition, there is a debridement treatment plan that incorporates wound assessment, the appropriate debridement method, the role of the multidisciplinary team, patient, and her family involvement in the decision-making process. During procedure Mrs. L was settled in a familiar environment and accompanied with her family.

Results : At Day 7, 60% of devitalized tissue had been debrided (Figure 2) and Day 30, there was 80% granulation tissue presented (Figure 3). At Day 90, there was 90% granulation tissue filled up (Figure 4). These results initiate patient, family, and nurse satisfaction.

Conclusion: Being in the hospital with a wound and being at home with a wound can be quite different. Prior to starting debridement nurse should consider whether debridement is the best course of action.

In this case report, nurse provided personalized care to Mrs. L and reduce hospital readmission. This rapid debridement promoted a healing response, leading to a positive healing outcome for Mrs. L.