

## Wound Care/Dressing Protocol – SKIN TEAR

### Wound Definition

A skin tear is a traumatic wound occurring principally on the extremities of older adults as a result of friction and/or shearing forces which separate the epidermis from the dermis, or separate both the epidermis and the dermis from underlying structures.<sup>1</sup>

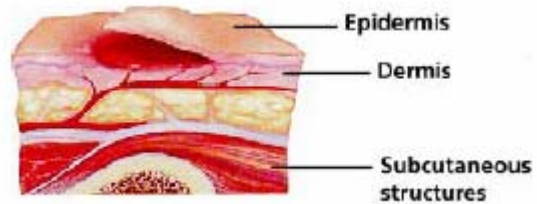


Photo: © Wound Care Strategies, Inc., 1999

### Goals

- Protect from moisture or contamination.
- Protect and secure viable skin flap.
- Prevent further injury.



**Standard Treatment Protocols**



**Prevention**

### Dressing Applications:

- ▶ CURAGEL\* or AQUAFLO\* Dressing
- ▶ POLYSKIN\* II Transparent Dressing

NOTE: The procedures listed above are guidelines. They are not meant to replace any existing protocols or institutional policies. The dressings used on these pages may not be covered under current Medicare reimbursement guidelines. Contact your local Sales Representative for more information



## SKIN TEAR Standard Treatment Protocols:

If a layer of skin is torn but still attached, replace the flap of skin over the wound, covering as much of the original surface as possible. A viable flap may not cover the entire wound, but should be positioned to increase the chance for it to "take" in the wound bed.

If there is tissue that is still attached but not viable, it may need to be removed according to physician order.

When removing any existing dressing to evaluate the wound, be careful not to disrupt healing or damage the intact skin surrounding the wound. Take special care not to disturb any skin flap.

Choose a dressing appropriate for the wound condition.

For most skin tears with minimal drainage which present on the patients extremities and where the patient exhibits friable skin, apply CURAGEL\* Wafer Hydrogel or AQUAFLO\* Hydrogel Disk Dressing to add moisture to the wound and secure with a KERLIX\* Bandage Roll to avoid using adhesive on friable skin.

For a skin tear on a patient with no drainage and relatively good skin integrity, a POLYSKIN\* Transparent Film Dressing can be applied. Transparent films ensure that the damaged skin has a moist environment in which to heal. An additional benefit of transparent film is its clarity which allows you to monitor healing without removing the dressing, further minimizing trauma to the area. Keep in mind that transparent films will not absorb and are not appropriate for draining wounds.

Some specific wound conditions may require other dressing choices.

For a skin tear that has moderate drainage and is red, warm or presents on a patient with a history of infected skin tears, choose a non-occlusive dressing such as XEROFLO\* Dressing and then wrap it in a gauze bandage roll for protection.

For a skin tear with heavy drainage and where the skin around the wound is extremely fragile, use a CURAFOAM\* PLUS Foam Dressing to absorb the drainage and cushion the wound. A guaze bandage roll such as KERLIX\* or CONFORM\* will hold it in place if the wound presents on an extremity. Gentle adhesive tape, such as TENDERSKIN\* Paper Tape or TENDERFIX\* Cloth Tape may be used for larger body areas.

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## **Skin Tear Prevention:**

Decrease or eliminate external pressures; reduce moisture from incontinence or other sources, and employ pressure relief devices if practical.

Also take care to reduce shear and friction:

- Keep the head of the bed raised less than 30 degrees unless contraindicated.
- Support the feet and legs whenever the head of the bed is elevated.
- Always flatten the bed before repositioning.
- When moving a patient, use lifting devices such as draw sheets, transport boards, gait belts and mechanical lifts. Do not drag your patient when repositioning.

Be sure the patient is receiving adequate hydration and nutrition and address underlying medical conditions that may contribute to wounding.

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## Skin Tear Application:



### **CURAGEL\* or AQUAFLO\* Dressing**

1. Choose the correct size dressing to cover about a 1" margin of intact skin around the wound.
2. Wash your hands and don gloves.
3. Cleanse the wound according to your institutional protocols with normal saline or a wound cleanser. Wipe from the center of the wound towards the wound margins.
4. Open the package, using clean technique.
5. Reglove.
6. Apply the dressing to the wound following the delivery system described on the package.
7. Secure the dressing by wrapping it with a KERLIX\* Bandage Roll.
8. This dressing should be changed every three to seven days.

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## Skin Tear Application:



### **POLYSKIN\* II Transparent Film Dressing**

1. When applying a dressing, choose the size that will cover about a 1" margin of clear skin around the reddened area for best fit and adherence.
2. Wash your hands and don gloves.
3. Cleanse the wound with normal saline or a commercial wound cleanser according to your institutional protocol.
4. Open the package, using clean technique. Reglove.
5. Peel back at the #1 tab and remove the paper backing. Note the dressing will curl slightly to allow you to apply with the adhesive side down, without sticking to your gloves.
6. Slowly peel back the clear plastic cover at the #2 tab and smooth the dressing gently over the skin.
7. If applying over a heel or elbow, cut the dressing as shown to remove excess dressing material. This will be more comfortable for the patient and will increase wear time. Be sure when cutting the dressing that you do not completely remove either the #1 or #2 tabs, as these are necessary for application.
8. This dressing should be changed every three to seven days. However, if you see fluid extending to the film edges or the dressing edges begin to lift or curl, change the dressing promptly.

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## Trademarks

Trademark	Owner
AQUAFLO	Sherwood Services AG
CONFORM	Tyco Healthcare Group LP
CURAFLOAM	Beiersdorf AG
CURAGEL	Beiersdorf AG
KERLIX	Tyco Healthcare Group LP
POLYSKIN	Tyco Healthcare Group LP
TENDERFIX	Tyco Healthcare Group LP
TENDERSKIN	Tyco Healthcare Group LP
XEROFLO	Sherwood Services AG

### Reference:

1 - Payne, R. L. & Martin, M. (1993). Defining and classifying skin tears: Need for a common language. *Ostomy/Wound Management: The Journal of Extended Patient Care*, 39(5), pp. 16-20, 22-24, 26.