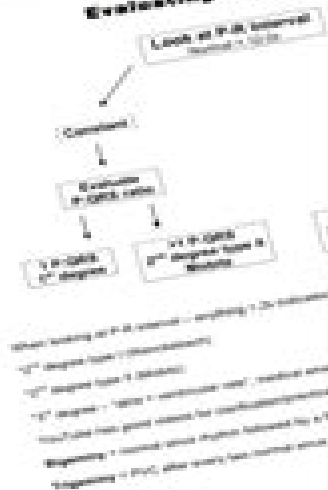


NPTE STUDY GUIDE

Evaluating Heart Block



Other Systems

STAGES OF HEALING

Infarcting phase (1-3 days)

- Consists of platelet activation and clotting cascade
- Most cells, neutrophils, and monocytes
- Clean wound and tissue restoration
- Re-epithelialization occurs within 48 hours, but takes ~3 days to see

Proliferative phase (3-21 days)

- Capillary buds and tissue granulation appears
- Wound closure and contraction

Maturation phase (21 days-2 years)

- Initiated when granulation tissue and epithelial differentiation begin to appear in wound bed
- May reach 80% tensile strength when completely healed
- Hypertrophic scarring can significantly impact maturation

WOUND EXUDATE

Serous - clear, watery, normal drainage

Serosanguineous - red, thin, watery (good) drainage

Sanguisanguineous - light red, watery drainage

Serosanguineous - cloudy, opaque with yellow or tan tint, early warning signs of infection and always abnormal

Purulent - yellow, green, thick, malodorous

Fester - foamy, frothy, thick, malodorous, bloody, infected

Wound classification (partial and venous)

- Superficial - non-healing wound
- Partial - thickness - below
- Full-thickness - 4mm depth, subcutaneous fat visible, secondary intention
- Subcutaneous - fat, muscle, tendon, bone, secondary intention

Arterial ulcers - do NOT elevate legs or use hot socks/blankets

Diabetic ulcers - Wagner Ulcer scale

Pressure ulcers - Norton and Braden scales

Pressure ulcer staging

- Stage 1 - non-perforated redness, local discoloration
- Stage 2 - partial thickness, open with granulation tissue, sloughs
- Stage 3 - full-thickness fat visible, undermining and tunneling
- Stage 4 - bone, muscle, tendon, osteomyelitis possible
- "Suspected deep tissue" - bruising look
- "Unstageable" covered by eschar

Moisture testing - inability to perform a light moisture test indicates loss of protective sensation. Not able to perceive. Right is intact. May feel full-thickness wounds/burns

WOUND HEALING

Primary intention

- Surgical incisions, lacerations, punctures, avulsions and other traumatic wounds
- Minimal swelling and heal quickly in uncomplicated and orderly progression

Secondary intention

- Wound is left open to heal by scar formation which requires ongoing attention
- Abscesses, ulcers, arterial, venous or pressure ulcers
- Must full-thickness and chronically inflamed wounds

Tertiary intention

- Wound "delayed primary intention" because it occurs when healing needs to be delayed
- Closed with sutures once free of further infection/drainage, repair or debridement

Autolytic debridement - Drawings placed on wounds. Do not use on infected wounds

Cardiopulmonary

Chest Inspection

- Inspect for asymmetry in chest wall
- Inspect for asymmetry in chest wall
- Inspect for asymmetry in chest wall
- Inspect for asymmetry in chest wall

Respiratory auscultation

- Auscultation - listen for wheezes, crackles, rhales, and decreased breath sounds
- Auscultation - listen for wheezes, crackles, rhales, and decreased breath sounds

Cardiovascular assessment

- Assess for JVD, S3, S4, and murmurs
- Assess for JVD, S3, S4, and murmurs

Covers ALL
Topics!

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