

Cutaneous ulcers

Hx:

- Time: How long has it been present?
- How did it start?
- Progression: Have you, or anyone else, noticed it changing in size?
- Number: How many are there?
- PHx: Has this happened before?
- Previous investigations? (including WBC bone scan or MRI if osteomyelitis suspected; CTA for arterial study; soft tissue or bone sent for C&S or pathology)
- Previous treatments? (dressings, debridement, surgery)
- Any risk factors?:

Risk Factors:

- Extrinsic: pressure, shear, friction, moisture
- Intrinsic: Diabetes, arterial or venous insufficiency, lymphadema, paralysis or decreased level of consciousness, smoker, drugs (steroids, antineoplastics, anti-inflammatory drugs) or immunodeficiency, Hx of radiation therapy, end-stage renal disease, vasculitis, malnutrition

Examination:

- Location: (ischium, trochanter, sacrum, heel, scalp, etc)
- Size and depth: quantify (cm)
- Appearance (of debrided ulcer; can't establish stage if eschar present)
 - Stage I: non-blanchable erythema of intact skin
 - Stage II: Partial-thickness skin loss
 - Stage III: Full-thickness down to but not through fascia
 - Stage IV: Full-thickness with involvement of muscle/tendon/ligament/bone
- Eschar:
 - Dry
 - Wet (surrounding pus? cellulitis?)
- Colour (base of ulcer):
 - Necrotic (black)
 - Fibrous (yellow/tan colour)
 - Granulation tissue (beefy red/pink)
- Exudate (colour, consistency)
- Foreign bodies (ex: underlying metallic hip joint)
- Tunneling/sinuses (explore with q-tip/culture swab, NOT instrument; explore for possible connections to nearby structures, ex: rectum)
- Vascular exam => palpable pulses, temperature, skin change, hair loss
- Neurosensory exam => diminished? (gross sensation or 2-point discrimination or vibration)