

M1308 Exercises

Exercise 1: The patient has 2 Stage III pressure ulcers at admission. At Follow Up, one of the Stage III ulcers is closed and the other is covered with eschar.

	Column 1 Complete at SOC/ROC/FU & D/C Number Currently Present
Stage description – unhealed pressure ulcers	
a. Stage II: Partial thickness loss of dermis presenting as a shallow open ulcer with red pink wound bed, without slough. May also present as an intact or open/ruptured serum-filled blister.	
b. Stage III: Full thickness tissue loss. Subcutaneous fat may be visible but bone, tendon, or muscles are not exposed. Slough may be present but does not obscure the depth of tissue loss. May include undermining and tunneling.	
c. Stage IV: Full thickness tissue loss with visible bone, tendon, or muscle. Slough or eschar may be present on some parts of the wound bed. Often includes undermining and tunneling.	
d.1 Unstageable: Known or likely but unstageable due to non-removable dressing or device	
d.2 Unstageable: Known or likely but unstageable due to coverage of wound bed by slough and/or eschar.	
d.3 Unstageable: Suspected deep tissue injury in evolution.	

	Column 1 Complete at SOC/ROC/FU & D/C Number Currently Present	Column 2 Complete at FU & D/C Number of those listed in Column 1 that were present on admission (most recent SOC / ROC)
Stage description – unhealed pressure ulcers		
a. Stage II: Partial thickness loss of dermis presenting as a shallow open ulcer with red pink wound bed, without slough. May also present as an intact or open/ruptured serum-filled blister.		
b. Stage III: Full thickness tissue loss. Subcutaneous fat may be visible but bone, tendon, or muscles are not exposed. Slough may be present but does not obscure the depth of tissue loss. May include undermining and tunneling.		
c. Stage IV: Full thickness tissue loss with visible bone, tendon, or muscle. Slough or eschar may be present on some parts of the wound bed. Often includes undermining and tunneling.		
d.1 Unstageable: Known or likely but unstageable due to non-removable dressing or device		
d.2 Unstageable: Known or likely but unstageable due to coverage of wound bed by slough and/or eschar.		
d.3 Unstageable: Suspected deep tissue injury in evolution.		

Exercise 2: The patient has 1 Stage I, 2 Stage II, 3 Stage IIIs and a suspected deep tissue injury at admission. At Follow-Up, the Stage I is a Stage II and there are 2 more Stage IIs. The Stage IIs present at admission are healed. 1 Stage III is now a Stage IV covered with a muscle flap, one is closed and one is still a Stage III. The suspected deep tissue injury has evolved into a Stage IV.

	Column 1 Complete at SOC/ROC/FU & D/C
Stage description – unhealed pressure ulcers	Number Currently Present
a. Stage II: Partial thickness loss of dermis presenting as a shallow open ulcer with red pink wound bed, without slough. May also present as an intact or open/ruptured serum-filled blister.	
b. Stage III: Full thickness tissue loss. Subcutaneous fat may be visible but bone, tendon, or muscles are not exposed. Slough may be present but does not obscure the depth of tissue loss. May include undermining and tunneling.	
c. Stage IV: Full thickness tissue loss with visible bone, tendon, or muscle. Slough or eschar may be present on some parts of the wound bed. Often includes undermining and tunneling.	
d.1 Unstageable: Known or likely but unstageable due to non-removable dressing or device	
d.2 Unstageable: Known or likely but unstageable due to coverage of wound bed by slough and/or eschar.	
d.3 Unstageable: Suspected deep tissue injury in evolution.	

	Column 1 Complete at SOC/ROC/FU & D/C	Column 2 Complete at FU & D/C
Stage description – unhealed pressure ulcers	Number Currently Present	Number of those listed in Column 1 that were present on admission (most recent SOC / ROC)
a. Stage II: Partial thickness loss of dermis presenting as a shallow open ulcer with red pink wound bed, without slough. May also present as an intact or open/ruptured serum-filled blister.		
b. Stage III: Full thickness tissue loss. Subcutaneous fat may be visible but bone, tendon, or muscles are not exposed. Slough may be present but does not obscure the depth of tissue loss. May include undermining and tunneling.		
c. Stage IV: Full thickness tissue loss with visible bone, tendon, or muscle. Slough or eschar may be present on some parts of the wound bed. Often includes undermining and tunneling.		
d.1 Unstageable: Known or likely but unstageable due to non-removable dressing or device		
d.2 Unstageable: Known or likely but unstageable due to coverage of wound bed by slough and/or eschar.		
d.3 Unstageable: Suspected deep tissue injury in evolution.		

M1308 Exercises Answers

Exercise 1: The patient has 2 Stage III pressure ulcers at admission. At Follow Up, one of the Stage III ulcers is closed and the other is covered with eschar.

	Column 1 Complete at SOC/ROC/FU & D/C Number Currently Present
Stage description – unhealed pressure ulcers	
a. Stage II: Partial thickness loss of dermis presenting as a shallow open ulcer with red pink wound bed, without slough. May also present as an intact or open/ruptured serum-filled blister.	0
b. Stage III: Full thickness tissue loss. Subcutaneous fat may be visible but bone, tendon, or muscles are not exposed. Slough may be present but does not obscure the depth of tissue loss. May include undermining and tunneling.	2
c. Stage IV: Full thickness tissue loss with visible bone, tendon, or muscle. Slough or eschar may be present on some parts of the wound bed. Often includes undermining and tunneling.	0
d.1 Unstageable: Known or likely but unstageable due to non-removable dressing or device	0
d.2 Unstageable: Known or likely but unstageable due to coverage of wound bed by slough and/or eschar.	0
d.3 Unstageable: Suspected deep tissue injury in evolution.	0

	Column 1 Complete at SOC/ROC/FU & D/C Number Currently Present	Column 2 Complete at FU & D/C Number of those listed in Column 1 that were present on admission (most recent SOC / ROC)
Stage description – unhealed pressure ulcers		
a. Stage II: Partial thickness loss of dermis presenting as a shallow open ulcer with red pink wound bed, without slough. May also present as an intact or open/ruptured serum-filled blister.		
b. Stage III: Full thickness tissue loss. Subcutaneous fat may be visible but bone, tendon, or muscles are not exposed. Slough may be present but does not obscure the depth of tissue loss. May include undermining and tunneling.	1	1
c. Stage IV: Full thickness tissue loss with visible bone, tendon, or muscle. Slough or eschar may be present on some parts of the wound bed. Often includes undermining and tunneling.		
d.1 Unstageable: Known or likely but unstageable due to non-removable dressing or device		
d.2 Unstageable: Known or likely but unstageable due to coverage of wound bed by slough and/or eschar.	1	1
d.3 Unstageable: Suspected deep tissue injury in evolution.		

Exercise 2: The patient has 1 Stage I, 2 Stage II, 3 Stage IIIs and a suspected deep tissue injury at admission. At Follow-Up, the Stage I is a Stage II and there are 2 more Stage IIs. The Stage IIs present at admission are healed. 1 Stage III is now a Stage IV covered with a muscle flap, one is closed and one is still a Stage III. The suspected deep tissue injury has evolved into a Stage IV.

	Column 1 Complete at SOC/ROC/FU & D/C
Stage description – unhealed pressure ulcers	Number Currently Present
a. Stage II: Partial thickness loss of dermis presenting as a shallow open ulcer with red pink wound bed, without slough. May also present as an intact or open/ruptured serum-filled blister.	2
b. Stage III: Full thickness tissue loss. Subcutaneous fat may be visible but bone, tendon, or muscles are not exposed. Slough may be present but does not obscure the depth of tissue loss. May include undermining and tunneling.	3
c. Stage IV: Full thickness tissue loss with visible bone, tendon, or muscle. Slough or eschar may be present on some parts of the wound bed. Often includes undermining and tunneling.	
d.1 Unstageable: Known or likely but unstageable due to non-removable dressing or device	
d.2 Unstageable: Known or likely but unstageable due to coverage of wound bed by slough and/or eschar.	
d.3 Unstageable: Suspected deep tissue injury in evolution.	1

	Column 1 Complete at SOC/ROC/FU & D/C	Column 2 Complete at FU & D/C
Stage description – unhealed pressure ulcers	Number Currently Present	Number of those listed in Column 1 that were present on admission (most recent SOC / ROC)
a. Stage II: Partial thickness loss of dermis presenting as a shallow open ulcer with red pink wound bed, without slough. May also present as an intact or open/ruptured serum-filled blister.	3	1
b. Stage III: Full thickness tissue loss. Subcutaneous fat may be visible but bone, tendon, or muscles are not exposed. Slough may be present but does not obscure the depth of tissue loss. May include undermining and tunneling.	2	2
c. Stage IV: Full thickness tissue loss with visible bone, tendon, or muscle. Slough or eschar may be present on some parts of the wound bed. Often includes undermining and tunneling.	1	1
d.1 Unstageable: Known or likely but unstageable due to non-removable dressing or device		
d.2 Unstageable: Known or likely but unstageable due to coverage of wound bed by slough and/or eschar.		
d.3 Unstageable: Suspected deep tissue injury in evolution.		

M1308 Exercises

	Column 1 Complete at SOC/ROC/FU & D/C Number Currently Present
Stage description – unhealed pressure ulcers	
a. Stage II: Partial thickness loss of dermis presenting as a shallow open ulcer with red pink wound bed, without slough. May also present as an intact or open/ruptured serum-filled blister.	
b. Stage III: Full thickness tissue loss. Subcutaneous fat may be visible but bone, tendon, or muscles are not exposed. Slough may be present but does not obscure the depth of tissue loss. May include undermining and tunneling.	
c. Stage IV: Full thickness tissue loss with visible bone, tendon, or muscle. Slough or eschar may be present on some parts of the wound bed. Often includes undermining and tunneling.	
d.1 Unstageable: Known or likely but unstageable due to non-removable dressing or device	
d.2 Unstageable: Known or likely but unstageable due to coverage of wound bed by slough and/or eschar.	
d.3 Unstageable: Suspected deep tissue injury in evolution.	

	Column 1 Complete at SOC/ROC/FU & D/C Number Currently Present	Column 2 Complete at FU & D/C Number of those listed in Column 1 that were present on admission (most recent SOC / ROC)
Stage description – unhealed pressure ulcers		
a. Stage II: Partial thickness loss of dermis presenting as a shallow open ulcer with red pink wound bed, without slough. May also present as an intact or open/ruptured serum-filled blister.		
b. Stage III: Full thickness tissue loss. Subcutaneous fat may be visible but bone, tendon, or muscles are not exposed. Slough may be present but does not obscure the depth of tissue loss. May include undermining and tunneling.		
c. Stage IV: Full thickness tissue loss with visible bone, tendon, or muscle. Slough or eschar may be present on some parts of the wound bed. Often includes undermining and tunneling.		
d.1 Unstageable: Known or likely but unstageable due to non-removable dressing or device		
d.2 Unstageable: Known or likely but unstageable due to coverage of wound bed by slough and/or eschar.		
d.3 Unstageable: Suspected deep tissue injury in evolution.		

	Column 1 Complete at SOC/ROC/FU & D/C
Stage description – unhealed pressure ulcers	Number Currently Present
a. Stage II: Partial thickness loss of dermis presenting as a shallow open ulcer with red pink wound bed, without slough. May also present as an intact or open/ruptured serum-filled blister.	
b. Stage III: Full thickness tissue loss. Subcutaneous fat may be visible but bone, tendon, or muscles are not exposed. Slough may be present but does not obscure the depth of tissue loss. May include undermining and tunneling.	
c. Stage IV: Full thickness tissue loss with visible bone, tendon, or muscle. Slough or eschar may be present on some parts of the wound bed. Often includes undermining and tunneling.	
d.1 Unstageable: Known or likely but unstageable due to non-removable dressing or device	
d.2 Unstageable: Known or likely but unstageable due to coverage of wound bed by slough and/or eschar.	
d.3 Unstageable: Suspected deep tissue injury in evolution.	

	Column 1 Complete at SOC/ROC/FU & D/C	Column 2 Complete at FU & D/C
Stage description – unhealed pressure ulcers	Number Currently Present	Number of those listed in Column 1 that were present on admission (most recent SOC / ROC)
a. Stage II: Partial thickness loss of dermis presenting as a shallow open ulcer with red pink wound bed, without slough. May also present as an intact or open/ruptured serum-filled blister.		
b. Stage III: Full thickness tissue loss. Subcutaneous fat may be visible but bone, tendon, or muscles are not exposed. Slough may be present but does not obscure the depth of tissue loss. May include undermining and tunneling.		
c. Stage IV: Full thickness tissue loss with visible bone, tendon, or muscle. Slough or eschar may be present on some parts of the wound bed. Often includes undermining and tunneling.		
d.1 Unstageable: Known or likely but unstageable due to non-removable dressing or device		
d.2 Unstageable: Known or likely but unstageable due to coverage of wound bed by slough and/or eschar.		
d.3 Unstageable: Suspected deep tissue injury in evolution.		