

Skin Tear Management Guideline with ISTAP Classification

Stop Bleeding

Control bleeding & elevate the limb
Apply alginate if bleeding continues (remove once bleeding has stopped)
Manage pain



Cleanse

Cleanse wound with normal saline or Granudacyn®
Remove any clots from under skin flap



Assess the Flap

Gently realign skin flap with moist sterile swab stick (no tension)



Classify according to the ISTAP system and document



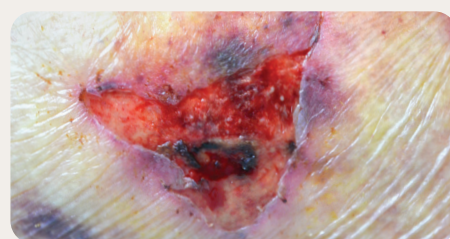
Type 1: No skin loss

Linear or flap tear that can be repositioned to cover the wound bed.



Type 2: Partial flap loss

Partial flap loss that cannot be repositioned to cover the wound bed.



Type 3: Total flap loss

Total flap loss exposing the entire wound bed.



Dressing Selection

DO NOT APPLY¹

Steri-Strip™ | Inadine® | Hydrocolloid

Mepitel® + Mesorb® + Tubifast®



- Moderate to high exudate
- Fragile or paper-thin skin
- Significant oedema present

Mepilex® Border Flex

Safetac
TECHNOLOGY



- Low to moderate exudate
- Draw arrow in direction of skin flap and the date applied



Monitoring and Management Tips

CARER - SKIN TEAR PREVENTION TIPS

- Ensure safe patient handling techniques
- Educate on skin care
- Conduct falls assessment and prevention
- Ensure safe patient environment
- Prevent skin trauma from adhesives, conventional dressings and tapes (use remover wipes)

PATIENT - SKIN TEAR PREVENTION TIPS

- Use pH friendly skin cleanser
- Apply a quality skin moisturiser twice per day
- Consider wearing protective clothing on limbs
- Optimise nutrition and hydration
- Wear comfortable/sensible shoes to prevent falls

Reference: 1. LeBlanc K, Baranoski S, Christensen D, Langemo D, Sammon MA, Edwards K, Holloway S, Gloeckner M, Williams A, Sibbald RG, Regan M. International Skin Tear Advisory Panel: a tool kit to aid in the prevention, assessment, and treatment of skin tears using a Simplified Classification System. Adv Skin Wound Care. 2013 Oct;26(10):459-476.

Find out more at www.molnlycke.com.au | www.molnlycke.co.nz

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