# DEPARTMENT OF NURSING

## SKIN ASSESSMENT FLOW SHEET

### SKIN ALTERATION:
- SW. Surgical Incision/Wound
- DS. Donor Site
- UL. Ulcer
- CE. Cellulitis
- FL. Fistula
- AB. Abscess
- PU. Pressure Ulcer
- RA. Rash
- SC. Scratches
- SAU. Skin Alteration/Incontinence
- DT. Drain/Tube Site
- GS. Graft Site
- ST. Skin Tear
- BL. Blisters
- EO. Ecdysone
- NSW. Non Surg Wound
- OT. Other:

### DESCRIPTION:
- AP. Approximated
- NAP. Non Approximated
- STI. Staples intact
- BUL. Sutures intact
- SSL. Steri Strips intact
- ED. Ecteme
- RS. Retention Sutures
- IN. Induration
- CR. Crapitus
- ER. Erythema
- PT. Partial Thickness
- FT. Full Thickness

### Document effectiveness of treatment/response to therapy. Shaded columns indicate minimum documentation for surgical wounds on MS units. ICU surgical wounds are documented on the Critical Care Flowsheet.

### SIGNATURE/TITLE

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