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**OPINION: WOUND CARE AND
CONSERVATIVE SHARP
DEBRIDEMENT: ROLE OF THE RN
AND LPN**
APPROVED DATE: 1/2011
REVISED DATE: 9/2014, 1/2018
7/2021 1/2024
ORIGINATING COMMITTEE:
SCOPE OF PRACTICE

Within the Scope of Practice of: RN LPN

ADVISORY OPINION WOUND CARE AND CONSERVATIVE SHARP DEBRIDEMENT: ROLE OF THE RN AND LPN

STATEMENT OF SCOPE

It is within the scope of practice of a registered nurse (RN) to provide wound care, which includes basic wound care, advanced wound care, and conservative sharp wound debridement of necrotic tissue, if the following requirements are met.

It is within the scope of practice of a licensed practical nurse (LPN) to contribute to the initial assessment of wounds through the gathering and recording of assessment data and to perform basic wound care, advanced wound care, and conservative sharp wound debridement of necrotic tissue, in collaboration with the RN or licensed practitioner (LP), on an ongoing basis if the following requirements are met:

I. GENERAL REQUIREMENTS

- A. An RN or LP is responsible for the comprehensive assessment of the patient and develops the initial and ongoing plan of treatment
- B. The LPN functions under the supervision of and in collaboration with a RN or LP
- C. The employer/agency maintains written policies and procedures
- D. Only LPNs who can show completion of an instructional program and demonstrate clinical proficiency are allowed to perform basic and advanced wound care and sharp wound debridement
- E. For conservative sharp wound debridement, the procedure is performed under the *direct supervision of a LP*

- F. Only RNs and LPNs who have had supervised clinical practice and have satisfactorily completed an instructional program which may include, but is not limited, to an accredited enterostomal therapy nursing education program (ETNEP), wound management specialty course, or a continuing education (CE) approved course in debridement are allowed to perform sharp wound debridement

DEFINITIONS

1. *Basic wound care* is defined as care that protects the wound, keeps the wound clean, moist, and well-nourished, and keeps pressure off the wound
2. *Advanced wound care* is defined as care of complex wounds, including but not limited to, open wounds with a depth that require packing, ostomies, and/or radiation burns. Specialized training is required before performing advanced wound care (i.e., classes, in-services, and/or other continuing education courses related to wound care, wound care products, and/or devices)
3. *Conservative sharp wound debridement* is defined as removal of loose, devascularized tissue, callous or hyperkeratotic tissue with the aid of a scalpel, scissors, or curette above the level of viable tissue.
4. *Direct supervision* is defined as “the LP must be immediately available to furnish assistance and direction throughout the performance of the procedure. It does not mean that the LP must be present in the room when the procedure is performed.”
5. *Non-viable tissue*: Debridement may include removing necrotic tissues, foreign debris, bacteria, or other devitalized tissue from the wound area. Tissue that is transitioning from viable to devitalized tissue is called slough. Tissue that is completely non-viable is called necrotic tissue.

II. **COURSE OF INSTRUCTION** includes but is not limited to:

BASIC

- A. Anatomy and physiology of the integumentary system
- B. Understanding wound physiology and wound healing principles
- C. Inspection and evaluation of wound site, including wound measurement
- D. Application of basic wound care products, including but not limited to, gauze and/or hydrocolloid dressings
- E. Monitoring and documentation of wound treatment
- F. Notifying the RN and/or LP of any changes to the clients wound status

ADVANCED

- A. Staging and treatment of complex wounds
- B. Selection and application of specialty wound care products including, but not limited to, maggot therapy and/or alginate wound care products
- C. Management of medical/clinical devices associated with wound care, i.e., negative pressure therapy.

SHARP WOUND DEBRIDEMENT

- A. Completion of a nationally recognized course and documented certification program prior to performing sharp wound debridement (see General Requirements), which will include documented competency in the skills and tasks being performed.
- B. Anatomy and physiology of the integumentary system and the functional

- relationship of structures such as tendons, nerves, and blood vessels
- C. Indications and contraindications for sharp wound debridement and use of local anesthetics creams or agents
 - D. Principles of wound healing and management
 - E. Potential complications and adverse reactions of sharp wound debridement
 - F. Technique of sharp wound debridement and return demonstration
 - G. Aftercare instructions, including pain management.
 - H. Additional nursing care responsibilities

III. RATIONALE

An RN and/or LPN with completed education can provide wound care as delegated by an RN and/or LP. An RN and/or LPN can modify the plan of care for basic and advanced wound care in collaboration with an RN and/or LP based on the identification and communication of changes in the client's status. The removal of devitalized tissue may be imperative to the improvement of outcomes for patients requiring wound care.

Before performing these activities, RNs must be able to show completion of a formal educational program and demonstrate clinical competency that is validated by a LP or an RN and function within agency policies addressing the activities.

RNs and LPNs with documented education and demonstrated proficiency in conservative sharp wound debridement can safely perform this procedure under the *direct supervision of a LP*.

IV. REFERENCES

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