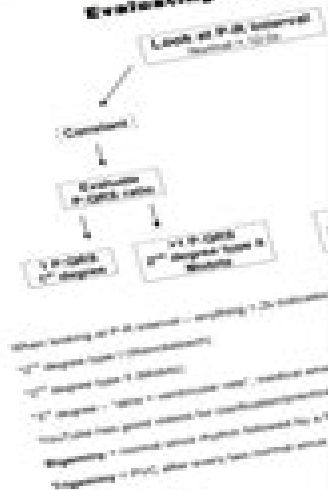


# NPTE STUDY GUIDE

## Evaluating Heart Size



## Other Systems

### STAGES OF HEALING

#### Information phase (1-10 days)

- Consists of platelet activation and clotting cascade
- Most cells, neutrophils, and monocytes
- Clean wound and tissue restoration
- Re-epithelialization occurs within 48 hours, but takes ~3 days to see

#### Proliferative phase (3-21 days)

- Capillary buds and tissue granulation appears
- Wound closure and contraction

#### Maturation phase (7 days-2 years)

- Initiated when granulation tissue and epithelial differentiation begins to appear in wound bed
- May reach 80% tensile strength when completely healed
- Hypertrophic scarring can significantly impact maturation

### WOUND EXUDATE

**Serous** - clear, watery, normal drainage

**Serosanguineous** - red, thin, watery, (normal drainage)

**Sanguisanguineous** - light red, watery drainage

**Serosanguineous** - cloudy, opaque with yellow or tan tint, early warning signs of infection and always abnormal

**Purulent** - yellow, green, thick, (WBCs/PMNs)

**Fester** - foamy, frothy, black/dark, (fatty attached)

#### Wound classification (arterial and venous)

- Superficial - non-healing, red/pink
- Partial - thickness - below
- Full-thickness - 4mm depth, subcutaneous fat visible, secondary intention
- Subcutaneous - fat, muscle, tendon, bone, secondary intention

**Arterial ulcers** - do NOT elevate legs or use hot socks/blankets, exercise

**Diabetic ulcers** - Wagner Ulcer scale

**Pressure ulcers** - Norton and Braden scales

#### Pressure ulcer staging

- Stage 1 - non-perforated redness, local discoloration
- Stage 2 - partial thickness, open with granulation tissue, blisters
- Stage 3 - subcutaneous fat visible, undermining and tunneling
- Stage 4 - bone, muscle, tendon, osteomyelitis possible
- "Suspected deep tissue" - bruising look
- "Unstageable" if covered by eschar

**Moisture testing** - inability to perform a light manipulation indicates loss of protective sensation. Not able to perceive (light is intense). May lead to pressure ulcers/blisters

### WOUND HEALING

#### Primary intention

- Surgical incisions, lacerations, punctures, lacerations and partial thickness wounds
- Minimal swelling and heal quickly in uncomplicated and orderly progression

#### Secondary intention

- Wound is left open to heal by scar formation which requires ongoing attention
- Abscesses, ulcers, arterial, venous or pressure ulcers
- Must full-thickness and chronically inflamed wounds

#### Tertiary intention

- Wound "delayed primary intention" because it occurs when healing needs to be delayed
- Closed with sutures once free of further infection/drainage, repairs or debridement/surgery

**Autolytic debridement** - Drawings placed on wounds. Do not use on infected wounds.

## Cardiopulmonary

### Chest Inspection

- Inspect for asymmetry in chest expansion
- Inspect for asymmetry in chest expansion
- Inspect for asymmetry in chest expansion
- Inspect for asymmetry in chest expansion

### Respiratory auscultation

- Percussion
- Auscultation
- Inspection
- Palpation

### Respiratory exam

- Auscultation
- Percussion
- Inspection
- Palpation

### Respiratory exam

- Auscultation
- Percussion
- Inspection
- Palpation

Covers ALL  
Topics!

# Npte Study Guide

**Mark Dutton**



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