

| Reference (include title, author, journal title, year of publication, volume and issue, pages) | Evidence level (I-VII) | Key findings, outcomes or recommendations |
|--|------------------------|--|
| Brown, A. (2015). The principles of holistic wound assessment. <i>Nursing Times</i> , 111, 14–16. | | <ul style="list-style-type: none"> - Outlines the different stages of wound healing - Highlights factors affecting wound healing - TIME is a valuable tool to provide systematic assessment and - documentation of wounds |
| Carville, K. (2021). <i>Wound Care Manual 6ED revised & Expanded (7th ed.)</i> . The Wound Care Manual (7th Edition). | | <ul style="list-style-type: none"> - An MDT approach is required for wound management - Outlines different types of wounds, their aetiology and classification of wounds (acute, chronic, surgical or non-surgical) - Principles of wound management (assessment, cleansing, debridement, dressing selection) - Describes when to use different dressings (dressing selection) |
| Contributor, N. T. (2019, November 25). Skin 1: The structure and functions of the skin. <i>Nursing Times</i> . https://www.nursingtimes.net/clinicalarchive/dermatology/skin-1-the-structure-and-functions-of-the-skin-25-11-2019/ | | <ul style="list-style-type: none"> - Understanding the structure and function of skin (protection, sensation, thermoregulation, metabolism, excretion) - Explains the impact of wound healing on the general population |
| Dechant, E. D. (2022). Considerations for Skin and Wound Care in Pediatric Patients. <i>Physical Medicine and Rehabilitation Clinics</i> , 33(4), 759-771. | | <ul style="list-style-type: none"> - There is not much guidance around wound management in children and it is therefore led by individual preference or product accessibility |

| | | |
|--|--|---|
| <p>Edwards, H., Gibb, M., Finlayson, K. & Jensen, R. (2013). Retrieved October 24, 2021, from https://cms.qut.edu.au/__data/assets/pdf_file/0003/451767/Book2-wound-dressing-guide.pdf</p> | | <ul style="list-style-type: none"> - Describes various dressing products, their use, contraindications and duration of use (dressing selection) |
| <p>H.A Wallace, B.M. Basehore, P.M, Zito. (2022). Wound healing phases. StatPearls. Retrieved January 31, 2022, from https://www.ncbi.nlm.nih.gov/books/NBK470443/</p> | | <ul style="list-style-type: none"> - Describes the stages of wound healing (haemostasis, inflammation, proliferative, maturation) - Chronic wounds take longer than 4-6 weeks to heal - Highlights factors associated with wound healing |
| <p>Kaim, K. (2016). <i>Wound Assessment</i>. 31.</p> | | <ul style="list-style-type: none"> - Describes the TIME assessment tool in detail - T- tissue is described by colour - Debridement is not always required or considered safe. Using a surfactant will help reduce bioburden - I- when wound healing is delayed and when to treat infection - M- moisture can be modified directly or indirectly - E- wound edges highlight the effectiveness of the wound management plan |
| <p>Murphy, C., Atkin, L., Dissemond, J., Hurlow, J., Tan, Y. K., Apelqvist, J., James, G., Salles, N., Wu, J., Tachi, M., & Wolcott, R. (2019). Defying hard-to-heal wounds with an early antibiofilm intervention strategy: 'Wound hygiene.' <i>Journal of Wound Care</i>, 28(12), 818–822. https://doi.org/10.12968/jowc.2019.28.12.818</p> | | <ul style="list-style-type: none"> - How to adequately cleanse wounds - Potable water, sterile water, normal saline or surfactants are adequate cleansing solutions |

| | | |
|--|--|---|
| <p>Robbins, J., & Dillon, J. (2016). Evidence-Based Approach to Advanced Wound Care Products (vol 105, pg 456, 2015). Journal of the American Podiatric Medical Association, 106, 46–46.</p> | | <ul style="list-style-type: none"> - Understanding the factors affecting wound management and classification of wound aetiology is a highly researched topic that provides nurses with evidence-based wound assessment tools |
| <p>World Union of Wound Healing Societies. (2020). Strategies to reduce practice variation in wound assessment and management: The TIME Clinical Decision Support Tool. London: Wounds International.</p> | | <ul style="list-style-type: none"> - Understanding the wound bed, the goals of wound management, and adequately assessing a wound will result in positive outcomes, regardless of product accessibility |
| <p>Wound source editors. (2019). Identifying Wound healing barriers by utilizing TIME. (2019) Retrieved January 31, 2022 from, https://www.woundsource.com/blog/identifying-wound-healing-barriers-utilizing-time</p> | | <ul style="list-style-type: none"> - TIME is a systemic approach to wound assessment - Different methods of debridement (biological, enzymatic, autolytic, mechanical, and surgical) are used to for wound bed preparation - Dressings are utilised to provide optimal moisture balance between the wound and peri wound |
| <p>Wounds, U. K. (2017). Best Practice Statement. Principles of Wound Management in Paediatric Patients.</p> | | <ul style="list-style-type: none"> - Aetiology of paediatric wounds (chronic wounds e.g., pressure injuries) - Pain should be taken seriously - Children are susceptible to blistering and epidermal tears. This should be considered when choosing a cleansing solution, dressing selection and adhesive remover for removal of dressings |