

Appendix A - Pressure Sores-Four Stages of Tissue Breakdown

Tissue breakdown proceeds through four recognizable stages. The four stages as described below should be referenced when submitting documentation for medicaid reimbursement.

Stage I

Stage I of tissue breakdown is reversible when pressure is removed. The important characteristics of stage I are:

- Erythema (redness that lasts a minimum of 15 minutes after pressure is removed), that turns white upon finger pressure.
- Warmth.
- Tenderness, and
- Occasional blistering.

Threat of further breakdown is present when erythema fails to dissipate upon removal of pressure. However, stage I is usually considered a transient circulatory disturbance, and the affected area should return to normal within 24 hours if pressure is removed.

Stage II

Stage II of tissue breakdown is generally reversible, but involves more profound circulation impairment than stage I. Stage II involves actual tissue damage. Characteristics of stage II include:

- Distinct break in epidermal integrity (may extend into dermis);
- Erythema;
- Disturbance in skin temperature;
- Tenderness; and
- Local swelling or edema.

In addition, stage II ulcers may have drainage. In stage II, there is a distinct break in skin integrity which may appear as excoriation or ulceration. The border of erythema is more

sharply defined. The area of erythema does not blanch upon application of fingertip pressure.

The skin may be either unusually warm or cooler to the touch. Additionally, local swelling or edema may be observed. Stage II tissue damage can be reversed with timely intervention; it generally heals quickly and easily.

Stage III

Stage III tissue damage involves more serious destruction and increased potential for complications. Stage III is characterized by:

- Epidermal and dermal destruction that penetrates subcutaneous tissue;
- Infection and cellulitis;
- Eschar;
- Pain; and
- Drainage.

Stage III pressure sores are contaminated and may be infected. The presence of eschar (black, gangrenous, necrotic tissue) is not uncommon.

If the subcutaneous layer is involved, whitish, fatty tissue is visible at the base of the wound. When properly attended, progression of a stage III ulcer can be halted and, under optimal conditions, the wound can heal in two to four weeks.

Stage IV

Stage IV wounds involve more extensive damage than is immediately apparent. These ulcers represent serious destruction and opportunities for grave complications.

Stage IV pressure sores are characterized by:

- Tissue destruction of the epidermis and dermis; and penetration of the deep subcutaneous layers;
- Muscle or bone destruction; and
- Possible undermining of the subcutaneous tissue.

If subcutaneous tissue has been undermined, superficial layers of skin around the wound may appear healthy while underlying tissue has been destroyed. In the undermined stage III or IV ulcer, the extent of tissue damage is not always visible.

Stage IV ulcers may be infected and so extensive as to create a threat to life. Sepsis and osteomyelitis are not uncommon occurrences.