
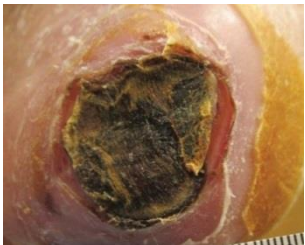





Wound Bed Structures

SKIN & WOUND – QUICK REFERENCE GUIDE

Applies to:	All Clinicians involved in wound care (RNs, LPNs, RPNs, OTs, PTs and prescribers).
Purpose:	To help clinicians identify the type of tissue that is visible in the wound bed.


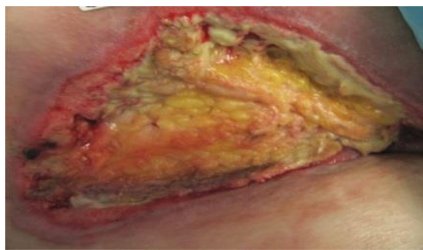
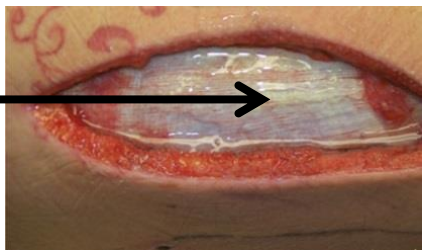
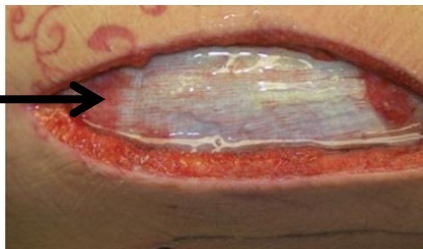

Tissue Types Found in a Wound Bed

Type of Tissue	Appearance	Example Photo
Slough	<ul style="list-style-type: none"> Yellow, green, grey, brown, tan. Wet or dry. Loose or firmly adhered to base. Has a stringy texture and appearance (can be picked up by forceps). Non-viable. 	
Eschar	<ul style="list-style-type: none"> Brown or black. Non-viable. Dry stable eschar is hard and firmly attached. Unstable eschar will be hard on top, but when palpated there is bogginess below the surface. This will transition to slough as autolysis occurs. 	
Granulation	<ul style="list-style-type: none"> Healthy clean, beefy, red. Pebbled. Viable, and needs to be protected. 	
Hypergranulation	<ul style="list-style-type: none"> Granulation tissue that forms above the surface of the surrounding tissue. Friable, delays epithelialization. Often due to bacterial burden or excessive moisture. 	
Epithelial	<ul style="list-style-type: none"> Healthy, deep pink to pearly pink. Matte finish. Migrates from edges of wounds as healing occurs. Can have satellite areas in shallow wounds. 	

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Wound Bed Structures

SKIN & WOUND – QUICK REFERENCE GUIDE

Type of Tissue	Appearance	Example Photo
Fibrin	<ul style="list-style-type: none"> • Yellow tissue, firmly attached to wound bed, cannot be picked up with forceps. • Indicates normal healing. • Precursor to granular tissue and should not be debrided. 	
Adipose	<ul style="list-style-type: none"> • Creamy, yellow. • Wet and soft when healthy. • Black/brown and can dry out when unhealthy. 	
Fascia	<ul style="list-style-type: none"> • Connective tissue, shiny white, thin to thick depending on location. • Encapsulates structures such as nerves, bone, vessels, muscles and organs. • Should be shiny and wider than a tendon, as it wraps around the structure. Not as firm as tendon or bone. 	
Muscle	<ul style="list-style-type: none"> • Striated, pink to dark red. • Firm and highly vascular. 	
Tendon	<ul style="list-style-type: none"> • When healthy, appears as strong fibrous tissue, shiny white or yellow, attaches muscle to bone. • Unhealthy tendon may yellow and can appear like slough. • Should have attachment points on bone and muscle. If the client moves the nearest joint, the tendon should shift or move. 	
Bone	<ul style="list-style-type: none"> • Hard, shiny, smooth, white appearance when healthy. • When unhealthy, can be brittle, rough and discoloured. • Often found in DFU and pressure injuries. • Will make a scraping sound when an instrument comes in contact with it. • If bone is palpable or visible, there is an increased risk of osteomyelitis, which can be very difficult to treat. 	