Wound Care Essentials: Quick Reference Nursing Guides

What is a **Deep Tissue Injury (DTI)?**

When unrelieved pressure causes damage to the skin and underlying structures, an ulceration can develop, known as a pressure ulcer. There are many factors that can contribute to the development of a pressure injury such as friction, shear, moisture, pressure, limited mobility, obesity, or other comorbidities. A **DTI** is damage to deeper underlying structures overlaid with either intact or non-intact skin, occurring due to prolonged pressure at the bone-muscle interface. The indication that the



damage is deep (versus superficial) is the non-blanchable deep red, maroon, or purple discoloration—in contrast to a superficial red Stage I injury.

How do you identify it?

Pressure injuries tend to occur over bony prominences on the body such as the shoulders, elbows, hips, sacrum, buttocks, ankles, heels and toes. **DTI pressure injuries** look like a deep bruise. If the outermost layer is not intact, then the epidermal separation will reveal a dark wound bed. It may also present as a blood-filled blister. Be careful not to confuse a DTI with a traumatic wound like a bruise or various dermatologic conditions that may present in similar fashion.

How do you treat it?

Treatment of **DTI** pressure ulcers is the same as all pressure ulcers—relieve pressure and prevent deterioration. Pressure relieving techniques such as positioning utilized in Stage I and II ulcers can be used. Applying skin prep will help to strengthen and protect the epidermal layer while the wound attempts to heal itself from underneath.



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