

Nebraska Board of Physical Therapy Opinion on Sharp Wound Debridement

It is the opinion of the Board of Physical Therapy that a Nebraska licensed physical therapist may perform sharp wound debridement as long as he/she can competently perform such procedure. This does not include physical therapist assistants.

"Sharp debridement is defined as a minor procedure, performed on an outpatient basis and requiring no anesthesia. Scalpel, scissors, and forceps are used, and only clearly identified devitalized tissue is taken. There is no bleeding associated with this procedure, and it may be performed by an adequately trained physical therapist.

Guidelines for sharp debridement include the use of a scalpel to cross-hatch eschar in preparation for enzyme application and to separate the edges of eschar from a necrotic wound bed. The scalpel may also be used to trim away the excess callus commonly found around the edges of a diabetic-neurotrophic foot ulcer. This callused tissue or hyperkeratotic rim is debrided to allow for more efficient repair. Scissors may be used to cut dangling necrotic tissue often found in pressure ulcers and other large wounds.

This procedure must be used only on clearly identified devitalized tissue, which is usually black, brown, gray, or yellow and is easily removed from the wound. If there is any doubt, the clinician should not proceed without medical guidance. Furthermore, adhering to policies, following procedures, and possessing proper training are essential for safely and properly performing this function."*

**Wound Healing: Alternatives in Management; Joseph M. McCulloch, PhD, PT; Luther C. Kloth, MS, PT; Jeffrey A. Feedar, BS, PT; second edition; page 154*

Adopted: January 1986

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