

Pressure Injury Staging



Stage 1
Non-blanchable erythema of intact skin with a localized area of nonblanchable erythema, which may appear differently in darkly pigmented skin.

Deep Tissue Injury
Intact or non-intact skin with localized area of persistent non-blanchable deep red, maroon, purple discoloration or epidermal separation revealing a dark wound bed or blood filled blister.

Stage 3
Full-thickness skin loss, in which adipose (fat) is visible in the ulcer and granulation tissue and epibole (rolled wound edges) are often present. Slough and/or eschar may be visible.

Stage 2
Partial-thickness loss of skin with exposed dermis. The wound bed is viable, pink or red, moist, and may also present as an intact or ruptured serum-filled blister.

Unstageable
Full-thickness skin & tissue loss in which the extent of tissue damage within the ulcer cannot be confirmed because it is obscured by slough or eschar.

Stage 4
Full-thickness skin and tissue loss with exposed or directly palpable fascia, muscle, tendon, ligament, cartilage or bone in the ulcer.

Mucosal Membrane Pressure Injury
Mucosal membrane pressure injury is found on mucous membranes with a history of a medical device in use at the location of the injury.

Medical Device Related Pressure Injury
Medical device related pressure injuries result from the use of devices; resultant pressure injury generally conforms to the pattern or shape of the device. The injury should be staged using the staging system.

Reference: Condensed from the NPIAP Press Release April 13, 2016: National Pressure Ulcer Advisory Panel (NPIAP) announces a change in terminology from pressure ulcer to pressure injury and updates the stages of pressure injury images: Courtesy of NPIAP. Used with permission



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