**CORRECTIONS EXERCICES D'ANGLAIS**

**Tout savoir sur les plaies et cicatrisation**

**Answers**

**Activity 1:**

1f 2e 3j 4g 5d 6h 7b 8i 9c 10a

**Activity 2:**

1 wound bed 2 exudate 3 Slough 4 Debridement 5 ankle-brachial pressure index (ABPI) 6 doppler 7 maintenance wound 8 Non-healable 9 Dressing removal 10 topical

**Activity 3:**

1B 2A 3 C 4B 5A

**Activity 4**: Video transript (complete)

**Interviewer**: Welcome back, everyone. John is here again to talk about wound management.

**John:** Right, I'd like to talk about TIME now. TIME is an (1) acronym for a framework which helps to identify barriers to healing in the wound bed and identifies expected outcomes of treatment.

The acronym TIME stands for Tissue, Infection, Moisture balance and Edges of the wound.
Looking at the tissue factor first; the tissue is not (2) viable if there are still areas of necrosis in the wound. This means that the tissues of the wound bed do not have sufficient blood supply to survive.

Debridement of necrotic tissue is necessary to prepare the wound for healing. This is often a (3) surgical procedure especially if large amounts of necrotic tissue have to be removed.

The expected outcome is a wound bed which is well (4) vascularised and has a good blood supply.

**Interviewer:** OK, so the first factor looks at the blood supply to the tissues around a wound?

**John:** That's right.
The second factor to consider is whether (5) inflammation or infection is present. The aim is to remove the infection and reduce the bacterial load.

This is done by using (6) antimicrobial dressings as well as antibiotic medication.

Reduced inflammation around the wound is the expected outcome.

**Interviewer:** This factor is the presence of infection, right?

**John:** That's exactly right. Next, the moisture (6) imbalance of the wound is treated. Excessive exudate or discharge of fluid from the wound cause maceration or softening of the wound edges.

On the other hand, desiccation or excessive (7) dryness also slows healing.

In order to restore the moisture balance, it's necessary to use hydrating dressings which add (8) moisture to dry wounds.

Negative pressure dressings, e.g., VAC dressings remove (9) excess fluid in macerated wounds. The expected outcome is that the wound will have an optimal moisture balance.

**Interviewer:** So, whether the wound is too wet or too dry is also important?

**John:** Very important. Finally, if the edge of the wound does not heal or advance, the wound becomes a (10) chronic wound. It then becomes necessary to reassess the wound.

During reassessment different wound management needs to be considered. An example of this is a (11) skin graft which is used to replace damaged skin. The desired result is that the edge of the wound will advance and heal.

**Interviewer:** Thanks for coming in today. A very interesting talk indeed.