

# Pressure ulcer / Moisture Lesion tool

	Pressure Ulcer	Moisture Lesion	Comments
<b>Cause</b>	Pressure, Shear, friction	Moisture present, shiny skin. Incontinence. Can be associated with Dermatitis	Can also be a combined lesion: PU and ML
<b>Location</b>	On bony prominence. Limited to one lesion	Usually on soft tissue. A combination of moisture and friction may cause a ML in skin folds, anal cleft, and perianal region	A PU may develop where soft tissues are compressed (medical devices, tubing) ML in skin folds may include pressure (Obesity)
<b>Shape</b>	Circular, regular shape. One lesion	Diffuse, irregular shape. Superficial, several lesions	Irregular shape can be present in combined lesion
<b>Depth</b>	Can be deep to bone (Category 4)	Usually superficial but infection can lead to deeper lesion	
<b>Edges</b>	Defined, distinct edges	Irregular edges	Jagged edges can occur in ML exposed to friction
<b>colour</b>	Depends on depth of the lesion	Red skin due to moisture. Blanching with finger pressure. Can be macerated	Skin lesion can also be due to fungal infection
<b>Healing</b>	Can be very slow	Should resolve quickly once hygiene measures have been put in place	

Adapted from Defloor (2005), Epuap/Npuap (2014)