Quick Reference Wound Dressing Guide

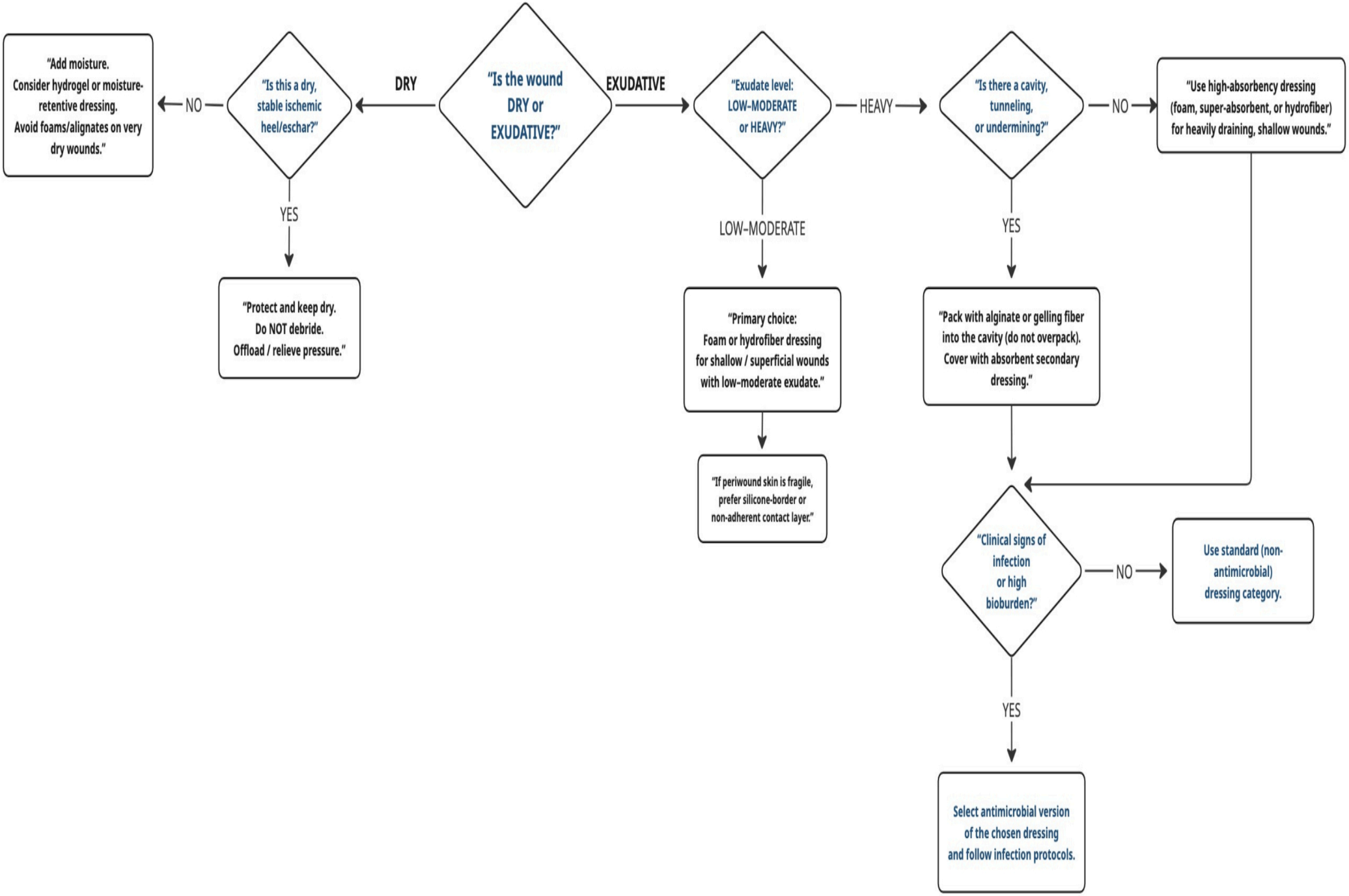
Evidence-Based Selection Flowchart

This flowchart is a quick reference tool to match wound characteristics (moisture, depth, tissue, infection) with an appropriate *category* of dressing.
It is designed for WCC® exam prep and for bedside decision support, and it should always be used alongside your facility's protocols and prescribing regulations.

How to read the flowchart

- Diamonds = clinical decisions (yes/no or choice between options)
- Rectangles = recommended dressing categories or actions
- Use it after a full wound assessment (location, etiology, perfusion, risk factors).

Wound Dressing Selection Flowchart



Key Dressing Categories at a Glance

Foam dressings – For low to moderate exudate, protection and cushioning. Avoid on very dry wounds without moisture support.

Alginate / gelling fiber dressings – For moderate to heavy exudate, especially in cavities. Always cover with a secondary dressing.

Hydrogel dressings – For dry or minimally exudative wounds when you need to add moisture. Avoid in heavily exudative wounds.

Hydrocolloid dressings – For low exudate, shallow, non-infected wounds. Not appropriate for heavily draining or clinically infected wounds.

Antimicrobial dressings – For wounds with local signs of infection or high bioburden, in combination with standard infection management.

Silicone-border / non-adherent contact layers – For fragile periwound skin or when frequent dressing changes are expected.

This guide supports clinical reasoning. It does not replace provider orders, vascular assessment, or your organization’s policies.