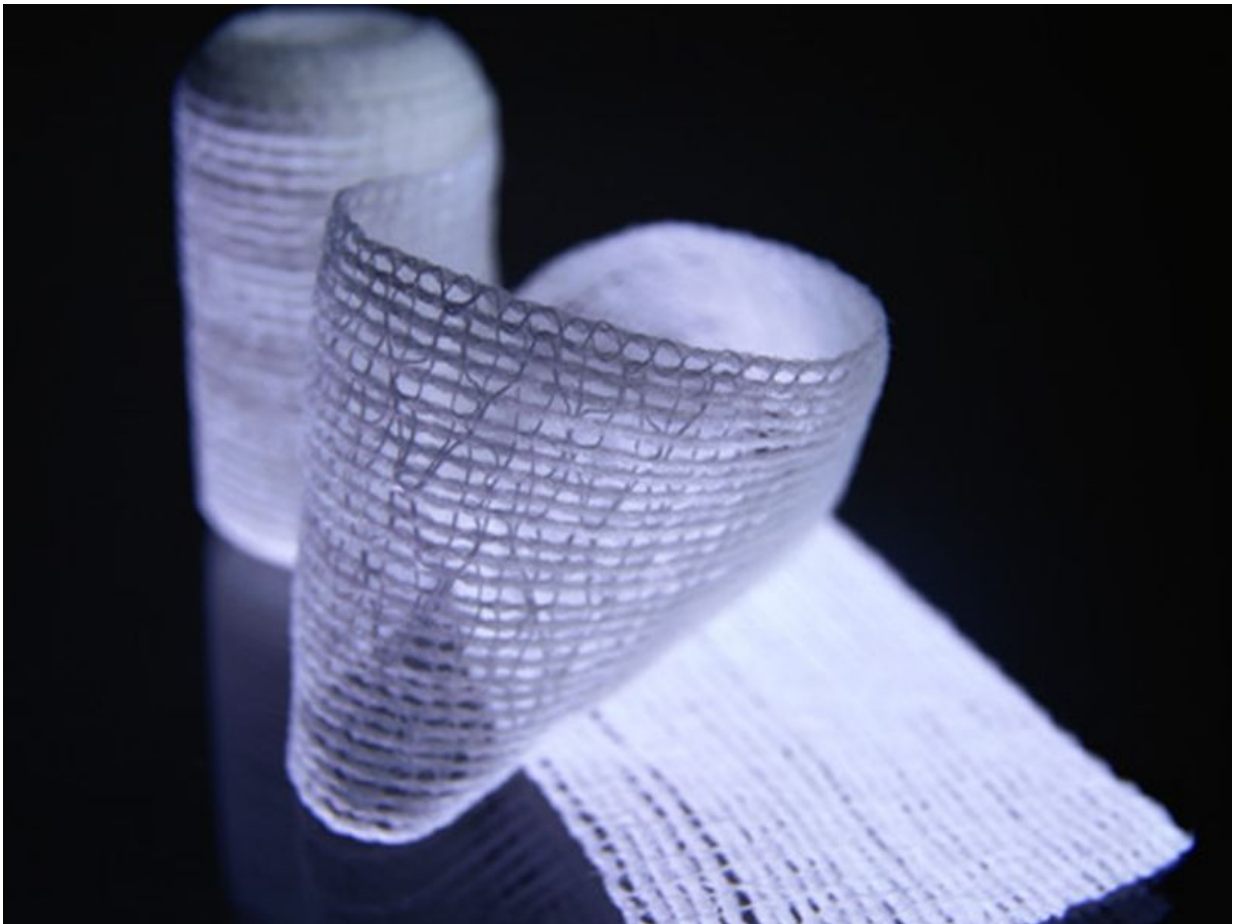


# NATA issues clinical guidance on acute skin trauma in sports

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(HealthDay)—Clinical decisions and intervention protocols after acute

skin trauma during participation in athletic and recreational activities vary among athletic trainers and are often based on ritualistic practices, according to a National Athletic Trainers' Association position statement published in the December issue of the *Journal of Athletic Training*.

Joel W. Beam, Ed.D., from the University of North Florida in Jacksonville, and colleagues present recommendations for cleansing, debridement, dressing, and monitoring of acute skin trauma.

The authors note that the wound and surrounding tissues should be thoroughly cleansed as soon as possible; the wound should be cleansed only when clinically necessary after the initial cleansing. Antiseptics should be used with caution, and scrubbing or swabbing the wound should be avoided. Before applying dressings, the area of acute skin trauma should be cleansed and debrided. Factors such as the type of wound, amount and type of debris, and training and expertise of the [health care provider](#) will affect the method of debridement. The area of acute skin trauma should be covered with non-occlusive or occlusive dressings to support the healing process; occlusive dressings are designed to interact with the wound and create an optimal healing environment. Patients should be monitored for signs of infection and development of adverse reactions; they should also be educated about changing dressings and wound healing.

"The goal in treating acute skin trauma is to achieve rapid healing while providing optimal function and cosmetic results and minimizing adverse events," Beam said in a statement.

**More information:** [Full Text](#)

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