10 Multi trait scaling structure for validation of WHQ (B6)

Hypothesised set of multi-scales and single items structure informed by clinical expectation

Hypothesised scale / single item	Number of items / sub-items in scale	Item / sub-item
Inflammation	4	1. Was there redness spreading away from the wound? (erythema/cellulitis)
		2. Was the area around the wound warmer than the surrounding skin?
		5. Has the area around the wound become swollen?
		7. Has the wound been painful to touch?
Wound leaking	5	3. Was any part of the wound leaking fluid?
		3a. Was it clear fluid? (serous exudate)
		3b. Was it blood-stained fluid? (haemoserous exudate)
		3c. Was it thick and yellow/green fluid? (pus/purulent exudate)
		10. Has anything been put on the skin to cover the wound?
Dehiscence	3	4. Have the edges of any part of the wound separated/gaped open on their own accord? (spontaneous dehiscence)
		4a. Did the skin separate?
		4b. Did the deeper tissue separate?
Wound care interventions	7	9. Have you sought advice because of a problem with your wound, other than at a planned follow-up appointment?
		12. Have you been given antibiotics for a problem with your wound?
		11. Have you been back into hospital for treatment of a problem with your wound?

		13. Have the edges of your wound been deliberately separated by a doctor or nurse?
		14. Has your wound been scraped or cut to remove any unwanted tissue? (debridement of wound)
		15. Has your wound been drained? (drainage of pus / abscess)
		16. Have you had an operation under general anaesthetic for treatment of a problem with your wound?
Smell	1	6. Has the wound been smelly?
Fever	1	8. Have you had, or felt like you have had, a raised temperature or fever? (fever <38°C)