

Help Make **PRESSURE ULCERS** *a Thing of the PAST.*

Prevent

- Be diligent in consistently providing good skin care to all.
- Consider all persons who are not able to reposition themselves to be at risk for developing pressure ulcers. Provide consistent repositioning assistance according to a schedule established in the care plan.
- Identify additional risk factors such as poor nutrition, dehydration, and incontinence.
- Provide pressure-reducing surfaces (chair cushions, etc.) for at-risk persons.
- Implement pressure-ulcer prevention education programs for all patients/residents, health care providers, caregivers, and family members.

Assess

- Use the Braden Scale or other valid tool to assess all patients/residents at the time of admission, at regular intervals thereafter, and with any change of condition that increases pressure-ulcer risk.
- Always assess skin when assisting with bathing and toileting.
- Check pressure points such as sacrum, ischia, trochanters, heels, elbows, and the back of the head.

Stage

- Use National Pressure Ulcer Advisory Panel (NPUAP) guidelines to regularly document the stage of pressure ulcers when they occur. (Regular and consistent staging provides essential information regarding the effectiveness of treatment interventions.)

Treat

- Treat pressure ulcers within 24 hours of identification.
- Provide pressure-ulcer treatment education, including positioning guidelines, to everyone who provides care to the person with pressure ulcers.



*Additional information about improving pressure ulcer care is available at
www.medqic.org and www.npuap.org.*