

NOVEMBER 1, 2021



WORLD WIDE STOP PRESSURE INJURY DAY
PATIENT, RESIDENT AND CAREGIVER TOOLKIT
THEME: PRESSURE INJURY PREVENTION: A COLLABORATION

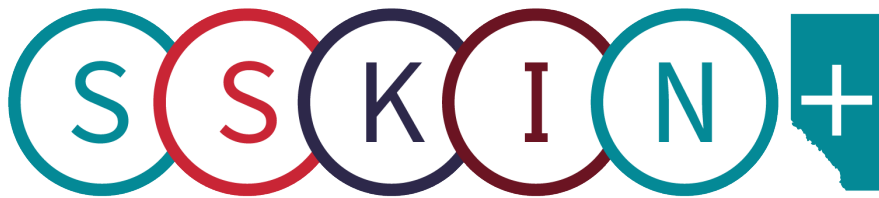
#PRESSUREINJURYPREVENTIONCOLLABORATION
Covenant Health, AHS, NRV SCN Collaborative



World Wide Stop Pressure Injury Day

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A Message for Patients, Residents, Families and Caregivers

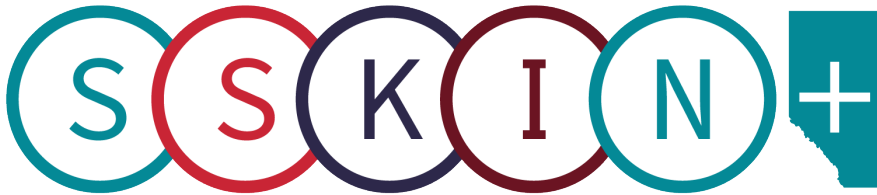
World Wide Pressure Injury Prevention Day November 18th, 2021

Covenant Health and Alberta Health Services (AHS) are working to prevent pressure injuries. These are also known as bed sores, pressure sores or pressure ulcers. We want to partner with our patients, residents, families and caregivers to let you know how we can prevent this from happening.

We have a campaign every year to let people know about this problem and what can be done. This year's campaign is called "Pressure Injury Prevention: A Collaboration."

Covenant Health and AHS are committed to patient safety and preventing harm in the form of preventable pressure injuries. In this document are ways for you to participate. We encourage you to talk to your health care team about this. This information does not replace advice from them.

If you need further information, please contact your direct health care provider.



COVID-19 and Pressure Injury Prevention

COVID-19 and Pressure Injury Development

The commitment to Pressure Injury Prevention remains a top priority for our organizations given that the pandemic has in some cases amplified issues even further. The majority of pressure injuries remain preventable and our programs and teams continue to support our pressure injury prevention programs into practice areas. COVID-19 may increase the development of pressure injuries in our patients. This can be caused by the following:

- Increase in the use of medical devices
- Not getting enough nutrition
- Decreased movement or mobility due to illness
- The patient's position (for example the patient is on her/his stomach to help breathing)
- The patient needing to be turned and repositioned
- Workforce challenges in the hospital or care setting

Pressure injuries often lead to longer stays in a facility. Pressure injuries can be painful and can also cause infections and negatively impact a person's life.

Share your Experiences as a Patient, Family or Caregiver

If you have experienced the development of a pressure injury during the COVID-19 pandemic in a care area of AHS or Covenant Health and want to share your story, please contact Paul.Wright@Albertahealthservices.ca by December 1st.

Share your Experiences as a Healthcare Provider

If you have a care experience to share about the challenges of pressure injury prevention during the COVID-19 pandemic, please email Marlene.Varga@Covenanthealth.ca by December 1st.



Pressure
Injury
Prevention 

November 18 is
World Wide Pressure
Injury Prevention Day.

Wear a red shirt!



Pressure injury prevention: SSKIN bundle



Patients, residents, families and caregivers are partners in pressure injury prevention. A pressure injury, also known as a pressure ulcer, pressure sore or bed sore, is damage to the skin and underlying tissues caused by unrelieved pressure. It can occur in any care setting. Most pressure injuries are preventable.

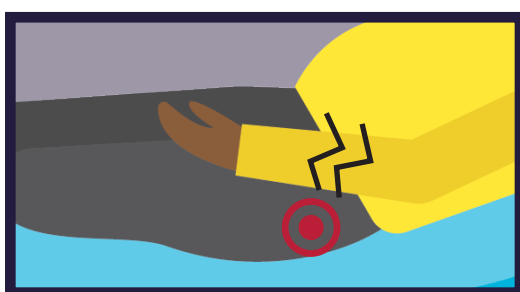


You may be at higher risk if:

- you have diabetes
- you are over the age of 65
- you have difficulty moving, changing position or walking
- you have loss of feeling or sensation
- you have a darker skin tone, which makes it difficult to see early signs of damage like redness
- you have many health conditions
- you are having or recovering from surgery
- you have a medical device, such as a splint, in place

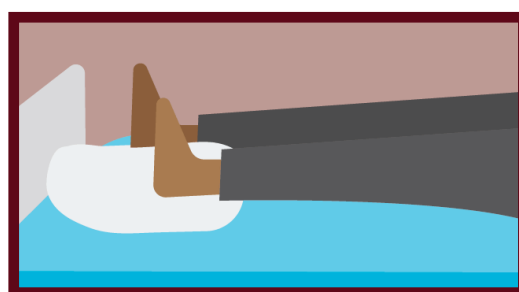
Following the **SSKIN** tips will help keep you safe.

Skin inspection



Tell someone if you see or feel any changes to your skin like redness or pain.

Surface



Using a special mattress, pillow or cushion may help protect your skin.

Keep moving



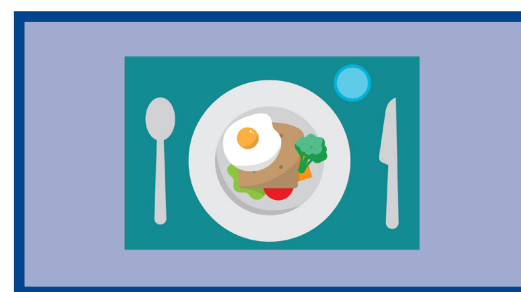
Change your position regularly when lying in bed or sitting in a chair. Participate in End PJ Paralysis by getting up, dressed (in your own clothes) and moving.

Incontinence and moisture



Ask for support with going to the bathroom and try to keep any moisture away from the skin.

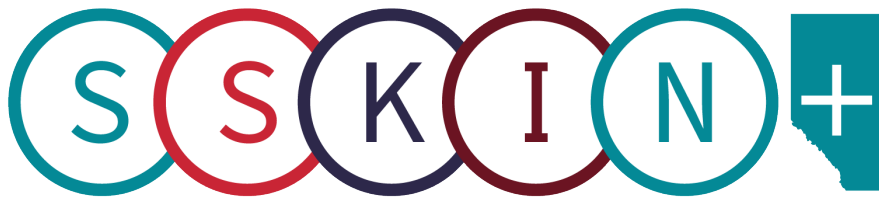
Nutrition and hydration



Drink plenty of water if safely able and eat well.

If you have had a pressure injury before, please let us know or ask your care team how you can participate in pressure injury prevention.





Nutrition & Pressure Injuries

Patients, Family & Residents

Nutrition & Pressure Injuries

Nutrition and hydration help the skin and muscles stay strong. Poor nutrition status can increase the likelihood of having impaired wound healing, increased infections, increased length of hospital stay and higher mortality. Consuming adequate calories and protein is essential to prevent and treat pressure injuries, but also helps to maintain skin and muscle tissue. Meeting fluid requirements is essential because being hydrated ensures nutrients move through our bodies. Speak with your registered dietitian or health care provider about your individual needs.

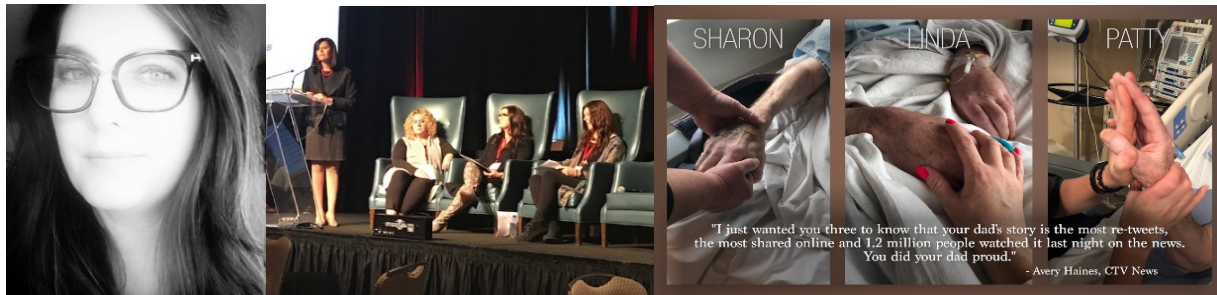
Nutrition risk factors for pressure injuries:

- Decreased mobility
- Poor intake of food and fluids
- Inability to feed themselves
- Unplanned weight loss
- Having an existing pressure injury

Nutrition Tips

1. **Meal Time** – make sure you are properly positioned during your meal so you can reach your meal and open packages/containers. Ask for help if needed.
2. **Choose high calorie/high protein foods** at meals and snacks
 - Full fat cheeses, eggs, peanut butter, nuts and seeds, meat, soy product, and lentils and legumes.
3. **Adequate Hydration**
 - Water, broth, soup, milk (full fat will provide extra calories), tea/coffee.
4. **Food First**
 - Have small frequent meals and snacks
 - Have fluids at the end of your meal and in between meals
 - Oral nutrition supplements (e.g. Boost and Ensure) should only be considered when adequate nutrition cannot be met through meals and fluids.
5. Speak with your healthcare team if you feel you may be at risk.

BIO Linda Moss – Patient Advocate for Pressure Injury Prevention “Essential together”



Linda Moss along with her sisters Sharon and Patty are daughters of Bob Wilson who experienced a horrific family tragedy that made National News in 2019 and was covered by every media outlet. It was watched by millions and their Fathers unstageable pressure wound went viral. They shared the graphic image because its reality, its impactful and when you see it, you react. Unfortunately, the family never knew what was festering under those sheets until it was too late. Now the family have been very active in drawing attention to the issue of pressure wounds in LTC/hospitals. Also to help pave the path a little smoother for other families and prevent what they experienced. **With every tragedy there is always a lesson learned and teachable positive movement.**

The family is honouring their Dad Bob Wilson, partnering with organizations that understand and support their cause, so together we all can make a difference. Linda’s goal is to foster a conversation, raise awareness between Caregivers, Medical staff, Leadership and Policy Makers to discuss wound care standards in Canada. To help bridge that communication/transparency barrier between families and medical teams, so its consistent, a focus and they become a united front.

In addition to sharing their story from a family’s perspective on the importance of pressure injury prevention.

Linda Moss who is representing the family does not have a medical background but has also become a very outspoken expert highlighting the importance of Patient Advocacy. The Caregiver role is imperative for not only the mental health but overall well being of the patient. Caregivers can be their eyes, ears, voice and helping hands to the medical teams. You are “Essential together” and have the same common goal...the Patients recovery.

Linda and her sisters learned firsthand how to care for a loved one in long term care with some help from medical professionals. As they were documenting their Dads progress, there are many words that came to mind that really coincide within the Hospital care. **They are what an “ECP” Essential Care Partner represents.**

E = Essential Together/Education/Everyone

C = Care Plan/Communication/Collaboration/Consistency/Champion/Compassion/Comfort/Companionship

P = Partner/People/Patient/Prevention/Policy

We are honoured to be “Change Agents and Patient Advocates” for:

<https://www.woundscanadafoundation.ca/> Dedicated to the advancement of wound prevention and management.

www.patientsafetyinstitute.ca Patients for Patient Safety CAD/Health Excellence CAD-improving patient safety.

www.theangelproject.ca Providing companionship, basic essential needs and assistance to LTC/Hospital patients.

FB page @woundcareaware Linda’s page, posting woundcare articles, support from other members incl professional advice/help.

Here is a 2 part short video; the close relationship with their Dad and Hospital experience.

https://drive.google.com/open?id=1KUVyBOJyHx3mEYUygXdrZ-jKl7_WHRDs



Brought to you by the Provincial World
Wide Stop Pressure Injury Day Committee

ADVOCACY PERSPECTIVES ON PRESSURE INJURY PREVENTION



Presenter: Linda Moss

Moderator: Marlene Varga

*"With every tragedy there is always a lesson learned and teachable
positive movement" -Linda*

**Hear her story from an advocates perspective on what
she is doing to help make change happen**

November 19th 12 - 1 P.M MST.

Email for details:

Marlene.varga@Covenanthealth.ca

ZOOM Link

[https://albertahealthservices.zoom.us/j/98512161941?
pwd=UXBsaWVRc0c3enZzN
Ss0N0ExbXdPd09](https://albertahealthservices.zoom.us/j/98512161941?pwd=UXBsaWVRc0c3enZzNSs0N0ExbXdPd09)



Pressure Injury

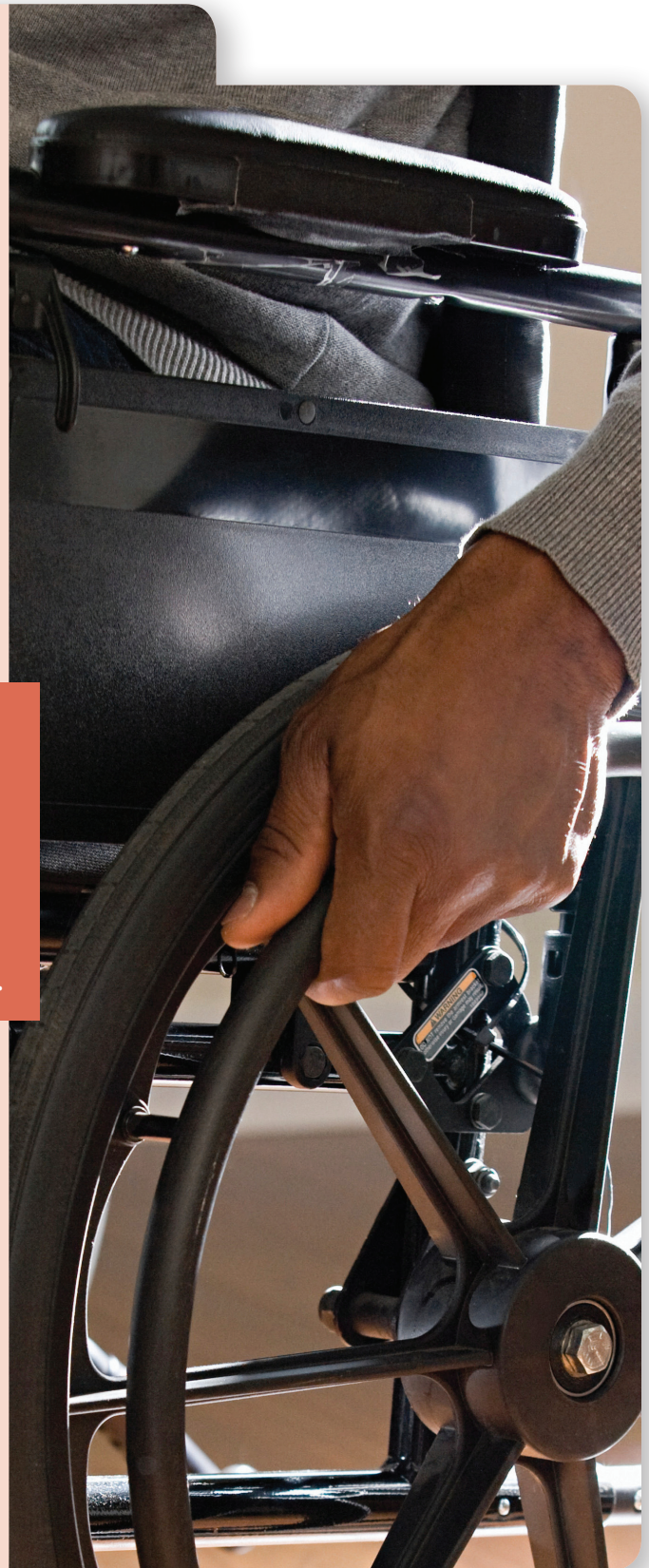
WHAT IS IT?

A pressure injury is a wound caused by . . . you guessed it: pressure! Pressure reduces or stops blood flow to an area, causing the skin and underlying tissues to break down and a wound to occur. In some cases the wound can go right to the bone. Pressure injuries are common over areas where the bone is close to the surface, such as at the base of the spine, on the hips and over the ankles or other vulnerable areas such as ears. If pressure is on the area for too long the skin and tissue in that area die. The result is a pressure injury.

Certain medications you are on, injuries to nerves caused by trauma, or diseases such as multiple sclerosis, may limit your ability to feel some sensations such as pain or other types of discomfort. If you can't feel the discomfort that usually comes with reduced blood flow, you are less likely to move to get the pressure off the area.

WHAT CAN I DO MYSELF (DIY)?

Removing pressure is key. Pressure blocks off blood flow, so you need to "reposition" yourself, or move, to allow blood to flow back into the area. This means you must **move regularly**, even if the movements are small (and sometimes that's all it takes). If you have issues that affect your ability to move it is also important that EVERY SURFACE you sit or lie on is designed to lower the pressure. This includes your wheelchair and bed and even your sofa, kitchen chair or car seat.



WHEN DO I CALL IN A PRO?

You may need to consult a physical therapist or occupational therapist who can help you choose the right surfaces to sleep or sit on. There are many types of specially designed furniture pieces available. If you have a pressure injury that persists or you are unsure of the care required you may need to call in a wound care specialist.

THE KEY RULE

Be aware of and remove or reduce pressure from bony areas.

WANT TO KNOW MORE?

Another set of free resources, called the [Care at Home series](#), may also be of interest to you, especially [Caring for Pressure Injuries at Home: Preventing and Managing Pressure Injuries](#).

Caring for Pressure Injuries at Home

Preventing and Managing Pressure Injuries

Wounds Canada has developed a simple guide that can be used by patients and their care partners for preventing or caring for pressure injuries at home.

Do you, or someone you are caring for at home, have a pressure injury? Are you or they at risk of developing a pressure injury? There are many things you can safely do to prevent a pressure injury from developing or to care for an existing pressure injury.

What is a pressure injury?

A pressure injury, also known as a pressure sore or a bed sore, is an area of discoloured or broken skin caused when the skin is pressed against a surface. It can happen because the pressure against the skin is long or intense (strong) or both. It can also be caused or made worse by a force called "shear." Pressure injuries usually occur over bony areas, such as heels, your tailbone and hips (see Figure 1 for the most common areas).

The pressure causes the skin and the tissue underneath to be pressed against the bone. Blood flow to the compressed tissues is reduced or stopped, which can cause damage to the tissues, leading to a pressure injury (see Figure 2).

Common causes of pressure injuries include:

- sitting or lying in one position for too long
- sitting or lying on any object, such as a catheter tube, lift sling, or even wrinkled sheets or clothing
- improper sitting posture
- incorrect methods of moving someone to a new position
- incorrect use, or sustained use without changing position, of equipment like wheelchairs, specialty wheelchair cushions and mattresses

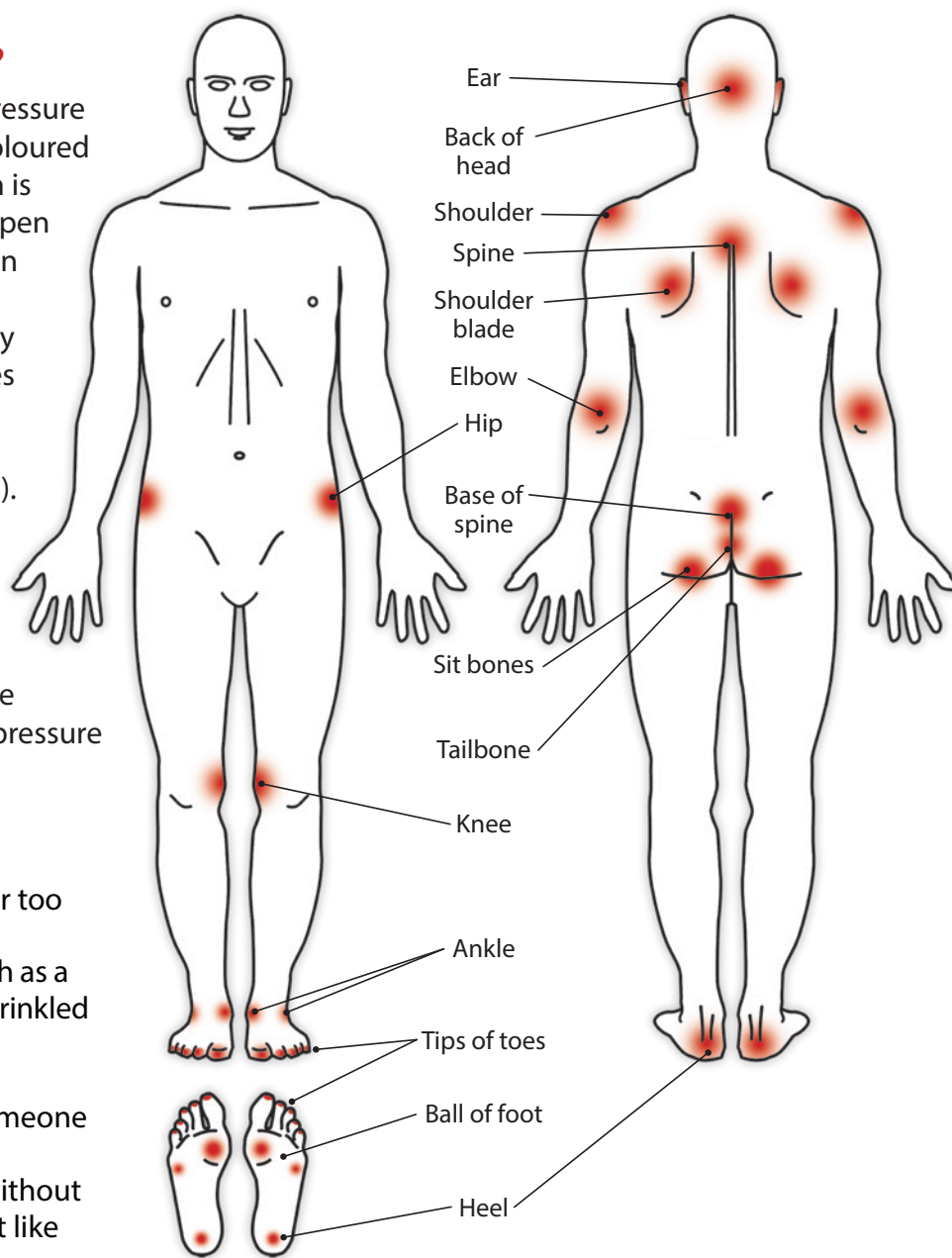


Figure 1: Common areas for pressure injuries

Disclaimer: The content in this resource is for informational purposes only and is NOT a substitute for professional medical advice, diagnosis or treatment. You should always consult with your health-care professional before starting any new treatment or changing or stopping an existing treatment.

What can lead to a pressure injury?

Lack of Ability to Feel

Most of the time, when you have been sitting too long in one position and your tissue is being pressed between a bone and the surface you're sitting on, you feel some discomfort and shift your position to relieve the uncomfortable feeling. You probably do this many times every hour and never even think about it. But there are times when this is not easy—or even possible—to do. Conditions such as multiple sclerosis, spinal cord injuries, diabetes, and paralysis from stroke or some medications like pain killers, can increase your risk of a pressure injury, because these conditions may block your ability to feel the uncomfortable feeling caused by the pressure. In these cases you might continue sitting or lying on the area, reducing blood flow and causing damage.

Lack of Ability to Move

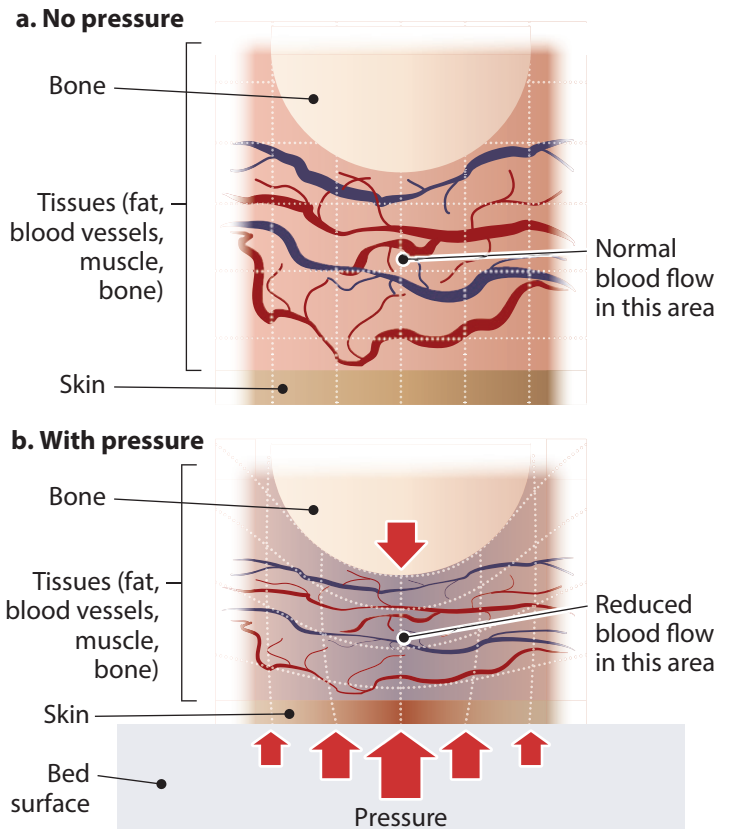
As well, any time you are unable to change your position you are at risk for developing a pressure injury. This can occur if you have paralysis, extreme weakness or if you are unconscious or deeply drugged.

Lack of Ability to Communicate

Dementia, Alzheimer's disease and other similar conditions, along with some medications, can increase your risk of a pressure injury because they may make you less able to communicate that you have skin discomfort. If you can't move yourself and you can't communicate to others that you are uncomfortable and need help to move, a pressure injury may occur.

Poor Skin Health

Other things play a role too. If your skin is often wet from urine, stool, sweat, saliva or wound drainage, it breaks down more easily, putting you at greater risk for a pressure injury. Skin that is too dry is also a problem. So good skin health is important. As well, if you don't drink enough fluids and eat healthy foods you may be at higher risk of a pressure injury.



Figures 2a and b: How pressure affects skin and other tissue



How long does it take to develop a pressure injury?

Sometimes it doesn't take very long. It can take as little as a few minutes to several hours, depending on what is causing the pressure, where it is located on the body, and the health of the person. Areas that often get a lot of pressure, such as heels, elbows and tailbones, may become red or discoloured quite quickly in people who spend most or all of their time in bed or on a chair. If the skin and bony areas are not protected they may worsen and become open sores. Once you have had a pressure injury, that area is more likely to get a new injury, even though the previous injury has healed.

What does a pressure injury look and feel like?

Some pressure injuries have only minor skin damage and some have a complete breakdown of the skin and other tissues, including muscle and even to bone. A pressure injury may appear as:

- A red, warm, tender area of unbroken skin. It may have a blister filled with clear fluid. The redness does not go away when pressure is taken off of the area.
- A purple or maroon, warm, tender area. It may have an unbroken blister filled with blood.
- An area of broken skin that ranges from a shallow hole filled with slightly moist, pink tissue, to a deep hole filled with red, yellow, brown, grey or black tissue that drains a lot of fluid.



Figure 3: An injury from pressure that has caused redness that has not resolved in 10 to 15 minutes and may develop into open areas

Important:

DO NOT rub reddened areas. Doing so can cause more damage.



Figure 4: Pressure injury on the hip



Figure 5: Pressure can cause a break in the skin that may be shallow or deep into muscle and bone. This type of pressure injury can easily lead to infection.



Figure 6: Extensive pressure injury on the tailbone

What can you do?

If you or the person you are caring for is at risk for a pressure injury, follow the steps listed below to prevent skin breakdown caused by pressure.

Look After Your Skin

- **Keep skin clean and dry.** Don't take long, hot baths; short, warm showers are a better choice. Use a mild, fragrance-free skin cleanser and a soft washcloth when cleaning skin. Pat skin dry, but dry well, especially between the toes and in skin folds (under breasts, in groin and armpits and anywhere skin overlaps or where skin touches skin).
- **Moisturize dry skin daily** with a mild, fragrance-free moisturizer (except between the toes and skin folds). It's best to moisturize right after patting skin dry.
- **Look at your skin** at least once a day for signs of pressure damage. Be sure to check parts you can't see—use a mirror or have a care partner help you.
- **Eat** a well-balanced diet and **drink** lots of non-caffeinated fluids.

Tips:

- If you or the person you are caring for is incontinent (they can't get to the toilet in time), remove soiled absorbent pads or incontinence products immediately, cleanse skin right away and replace the incontinence products with clean, dry ones. You may wish to apply a barrier cream such as zinc oxide to protect the skin from getting wet with urine and/or stool. This should be done after cleaning the skin. Regular visits to the toilet (a scheduled toileting routine) can help.
- If you are sweaty, change clothing often or choose clothing with the ability to "wick" moisture away from skin. Wool and bamboo are two natural fabrics that help keep moisture away from skin. Newer materials, such as those used in some sports clothing, do the same and can keep skin dry.

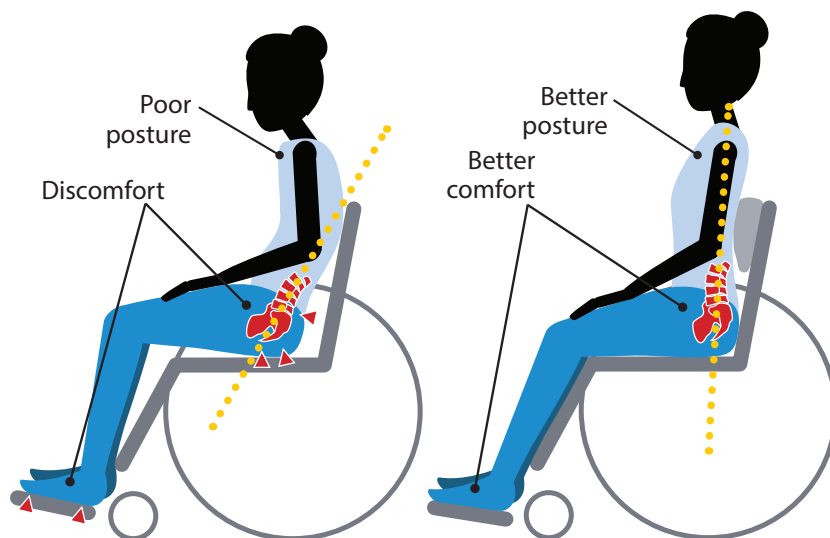


Figure 7: If you are in a wheelchair you are at higher risk for a pressure injury to the base of your spine, sit bones, tailbone and bottoms of feet. Proper posture and regular small movements will help you prevent pressure injuries.

Keep moving! Do small body activities or movements such as moving a hand, arm or leg or chair push-ups often (several times an hour).

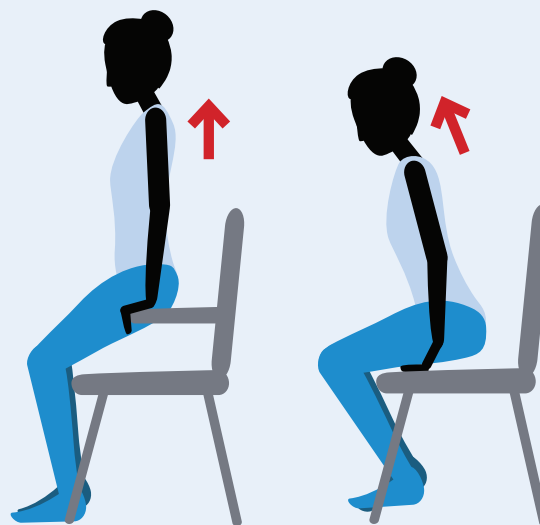


Figure 8a: To do a chair push-up, place your hands or arms on the armrests of the chair, lift your buttocks up off the chair seat and hold for a count of 5.

Figure 8b: You can also reduce pressure by leaning forward or sideways in a chair with no armrests for a count of 5. But **be careful** not to tumble onto the floor.

Keep the Pressure Off

The most important part of preventing or treating a pressure injury is making sure there is no pressure for long periods on any part of your body from sitting, or lying down or any type of equipment, such as shoes, casts and braces, breathing tubes or other medical devices.

The suggestions below can help you keep yourself or the person you are caring for safe from pressure injury.

- **Change positions often**, both when sitting and lying, so pressure is removed from the areas most at risk (over bony spots). Even small shifts can make a difference. This is very important if you have trouble feeling pain or discomfort. Get into the habit of changing positions, even if you don't feel discomfort. If you notice an area of red, warm, tender unbroken skin, change your position more often. Talk to your health-care provider about using assistive devices, such as trapeze bars, bedrails, chair armrests.
- **Place pillows** between your knees and/or ankles to keep them from touching. Keep your heels from touching your mattress by placing a pillow beneath your calves—even if you are using a specialty mattress.
- **Reduce the shear** that happens when you slide down in the chair or bed by making sure you are lying or sitting correctly. If possible, avoid raising the head of your bed more than 30 degrees for long periods.
- **Reposition correctly**. If you are caring for someone who cannot move themselves, you will need to reposition them so pressure does not stay for too long on any body part.
- **Create and use a turning schedule**. Contact your health-care professional to work with you to create a repositioning or turning schedule that will help you remember when and where to reposition in the chair or turn in bed. The schedule needs to be based on the health of the person and the quality of the surfaces they are on. **Note:** If the area of the body the person has been sitting or lying on becomes red, even with a schedule, they may need to be repositioned or turned more frequently or be on a better surface (i.e., better chair cushion or mattress).

Important:

Moving someone can be harmful to them and to you if it is not done correctly. It is best if your health-care professional can train you before you attempt to reposition someone.



Figure 9: Use a turning sheet to reposition someone in bed who cannot move themselves.

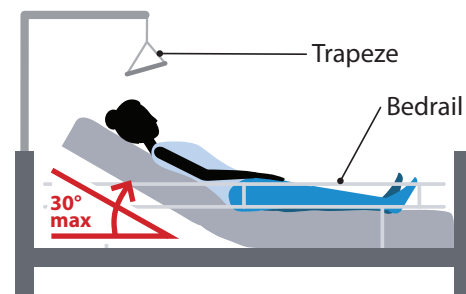


Figure 10: Avoid raising the head of your bed more than 30 degrees for long periods.

Tips:

- Most health-care supply stores have a range of pressure-reducing surfaces for both the chair and the bed. Make sure you use these products the way the manufacturer recommends. Check that they are working properly each time you use them. For the best performance and maintenance, consult an occupational or physical therapist.
- If you have a bed that elevates, lower the head of the bed before repositioning the person you are caring for. This makes it easier to move them.
- A bed with side rails and/or a trapeze bar can help a person reposition themselves.
- Lift, rather than slide, the person being repositioned. You may need two people to do the lifting to avoid injury to everyone.
- Learn how to use a turning sheet to help you in repositioning. Proper use of a turning sheet is safer for you and for the person you are turning.

Quick tips for preventing pressure injury

- Change your body position and make small body movements often. If you cannot do this yourself, ask for help.
- Use special support surfaces if you cannot move yourself.
- Avoid lying for long periods of time on bony areas such as your hip.
- To avoid a shear injury, use lifting or transferring devices such as a transfer board or a trapeze bar.
- Gently clean and pat dry, then moisturize.
- Protect skin from incontinence (loss of bowel and bladder function) by using a skin barrier cream and incontinence pad.
- Eat a well-balanced diet and drink plenty of fluids to keep skin healthy and hydrated.
- Do not rub reddened or discoloured areas of skin. This will cause more damage.
- If you are not sure if you are at risk for a pressure injury, ask your health-care professional to assess you. Then, together create a pressure injury prevention program designed especially for you.

What do you do if you have a pressure injury?

If you do notice that you or the person you are caring for does get a new pressure injury, **contact your health-care professional as soon as possible** to create a plan for treating the wound. Part of the plan will involve following most of the prevention steps listed in this resource because **a pressure injury will not heal if the pressure is not removed first.**

If you need to do your own dressing changes on the wound, go to [Caring for a Wound at Home](http://www.woundscanada.ca/docman/public/1680-care-at-home-series-changing-a-dressing/file) at www.woundscanada.ca/docman/public/1680-care-at-home-series-changing-a-dressing/file for information on how to do so safely.

Taking the Pressure Off

There are many products available to help you prevent pressure injuries—but which one should you choose? Your occupational therapist or home health store representative can help you decide which is the best choice for your situation. Here are some options:

Products to reduce pressure:

- mattresses or chair cushions (air, gel, foam overlay or high-density foam)
- heel and elbow protectors
- padded clothing

Equipment to assist with someone who can't move themselves:

- powered bed/mattress and/or chair
- turning sheets
- transfer boards and/or belts
- patient lifts and slings (ceiling-mounted or portable)

Equipment for moving and repositioning yourself:

- trapeze bars above the chair or bed
- bed side rails
- grab bars in bathroom
- transfer poles in bedroom and bathroom
- chair armrests
- lift recliners
- transfer boards



Many of these products can be very costly, so ask your health-care professional to help you source financial support. Consider financial assistance programs and organizations providing support, such as provincial/territorial aids-to-daily-living programs, private insurance, veteran services and organizations such as the ALS Society of Canada.

Frequently Asked Questions

My mom is in a wheelchair and doesn't move much. I don't want her to develop a pressure injury.

What should I do to help her?

Check her skin often for red spots. For example, your mom may move from her comfortable chair to a wheelchair to go to the car, then to a hard chair or stretcher in a clinic. Each time she comes into contact with a different surface, her skin may be at risk of harm.

What do I do if I see a red spot on the skin?

If you see a red spot immediately move the person so the pressure comes off the area. Contact the person's health-care professional to let them know right away.

My father is paralyzed and in bed all the time. How do I know if he needs to be turned?

When a person can't move themselves you need to do a couple of things to keep their skin from getting damaged. First, make sure you check their skin every day. Second, you will have to turn, or reposition, your father several times every day to make sure no area of his body can get damaged by pressure. Ask his health-care professional to help you create a turning schedule. Follow the schedule as planned. Report any red areas on his skin to the health-care professional as soon as you notice them.

How do I know if my chair cushion or mattress is inflated correctly?

Cushions on chairs and mattresses need to be looked after regularly. Each cushion or mattress has instructions for care that you should follow. Ask your occupational therapist, physiotherapist or the provider of the equipment (such as the pharmacy) for written steps on how to care for any equipment you are using.

My friend is in a coma, and when I visit him I notice his ears and the back of his skull are red. Why is this happening, and is there anything I can do?

Ears have no bones, but the skin over the cartilage that they are made of can become red and tender when they are touching a surface for too long. The back of a person's skull can also get red and tender if they are lying on it too long. Buy your friend a small, soft hat to protect his skin and ask the caregivers in his facility to put it on. Also ask them to make sure they are checking his ears at least every day.

Sometimes I have redness under my breasts. Is this a pressure injury?

No, redness in places where skin touches other skin, like under the breasts or in the groin (between the legs) is not usually caused by pressure. Redness under the breast tissue or in the groin may be due to extra moisture. Over time the area may have an odour, which may smell yeasty, and be painful. Some simple steps can help prevent this type of skin redness:

- Check these areas daily or more often.
- Clean the area and dry carefully.
- Wear breathable clothing that dries quickly.
- Wear a well-fitted bra if you need to hold your breasts up off your chest.

Tip:

- Take a photo of the reddened area or wound if you have a digital camera/tablet/phone. This can help you when you contact a health-care professional. You will be able to show them the new injury.





CARE AT HOME SERIES

Caring for Pressure Injuries at Home

Preventing and Managing Pressure Injuries

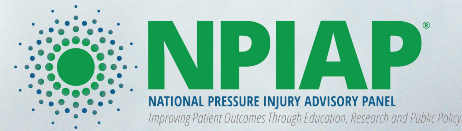
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WHAT ARE PRESSURE INJURIES?

Once called bedsores, pressure injuries are localized damage to the skin and underlying soft tissue. They usually form over bony prominences (like the tailbone and heels) or in relation to medical devices (like a breathing tube that presses on the face).

WORLD WIDE PRESSURE INJURY PREVENTION DAY 2021



www.npiap.com

LEARN MORE ABOUT PRESSURE INJURIES.

Talk with your healthcare provider and visit the National Pressure Injury Advisory Panel online at npiap.com



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STOP PRESSURE INJURIES

Have you ever noticed that sitting in the same position can get uncomfortable over time? That's your cue to change positions. But if you're unable to move or adjust, constant pressure is put on your skin, which restricts blood flow. Without adequate blood flow, the skin and tissue beneath the skin can die and wounds called pressure injuries can form.

UNDERSTANDING YOUR RISK

You may be at risk for pressure injuries if:

- You must stay in bed or can't move because of an illness or medical condition.
- You can't move because it's too painful.
- You are going to have surgery that might last 3+ hours.
- You use a wheelchair or sit for long periods of time.

CREATING A PLAN

If you or your loved one is at risk for a pressure injury or develops a pressure injury, talk with your healthcare provider to make a plan. These plans address a variety of factors that can weaken the skin.



MOVEMENT & COMFORT

Healthcare providers and caregivers may help you change positions at regular intervals. You may need to use a special bed or cushion that helps protect your skin. Your healthcare provider also will consider any appropriate medications.



SKIN CARE & CLEANSING

Beyond properly washing and drying your skin, it's important to manage your sweat, and bladder and bowel habits. Gently wash—don't scrub—your skin with a soft sponge or cloth. Your healthcare provider may recommend special cleansers and barrier products.



DIET & NUTRITION

Proper nutrition helps keep skin and muscles strong, which helps prevent pressure injuries and promotes healing if a pressure injury occurs.

- **Calories.** Without enough calories, you may lose muscle mass and weight.
- **Protein.** Increased protein intake can help pressure injuries heal. Protein repairs and maintains tissue and muscle.
- **Amino Acids.** These are the building blocks of protein. The amino acids arginine and glutamine are critical in wound healing.
- **Fluids.** Staying hydrated ensures nutrients are spread throughout your body.
- **Vitamins & Minerals.** Many vitamins and minerals are associated with healing.



**WORLD WIDE
PRESSURE INJURY
PREVENTION DAY**

NOVEMBER 18, 2021

STOP

**PRESSURE
INJURIES**

www.npiap.com

one GOAL worldwide:

STOP

Pressure Ulcer/Injuries

18 November 2021



How can you get involved?




- Host educational activities on prevention and treatment of pressure ulcers/injuries
- Organise awareness raising events to share information about pressure ulcers/injuries
- Reach out to your local community to inform them about pressure ulcers/injuries
- Make policy makers aware about pressure ulcers/injuries
- Join Stop Pressure Ulcers/Injuries community on Social media



Download support material for free at:

www.epuap.org

www.npiap.com

Follow us on   

Together for pressure ulcer/injury prevention

Get some inspiration from our partners around the world.



See more on:
www.epuap.org/stop-pressure-ulcers
www.npiap.com

Pressure Injuries: Just the facts!

Definition of Pressure Injury: A pressure injury is localized damage to the skin and/or underlying soft tissue usually over a bony prominence or related to a medical or other device. The injury can present as intact skin or an open ulcer and may be painful. The injury occurs as a result of intense and/or prolonged pressure or pressure in combination with shear. The tolerance of soft tissue for pressure and shear may also be affected by microclimate, nutrition, perfusion, co-morbidities and condition of the soft tissue.

Stages of Pressure Injuries



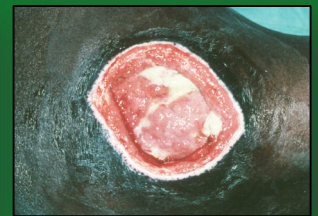
Stage 1 Pressure Injury: Non-blanchable erythema of intact skin
Intact skin with a localized area of non-blanchable erythema, which may appear differently in darkly pigmented skin. Presence of blanchable erythema or changes in sensation, temperature, or firmness may precede visual changes. Color changes do not include purple or maroon discoloration; these may indicate deep tissue pressure injury.



Stage 2 Pressure Injury: Partial-thickness skin loss with exposed dermis
Partial-thickness loss of skin with exposed dermis. The wound bed is viable, pink or red, moist, and may also present as an intact or ruptured serum-filled blister. Adipose (fat) is not visible and deeper tissues are not visible. Granulation tissue, slough and eschar are not present. These injuries commonly result from adverse microclimate and shear in the skin over the pelvis and shear in the heel. This stage should not be used to describe moisture associated skin damage (MASD) including incontinence associated dermatitis (IAD), intertriginous dermatitis (ITD), medical adhesive related skin injury (MARS), or traumatic wounds (skin tears, burns, abrasions).



Stage 3 Pressure Injury: Full-thickness skin loss
Full-thickness loss of skin, in which adipose (fat) is visible in the ulcer and granulation tissue and epibole (rolled wound edges) are often present. Slough and/or eschar may be visible. The depth of tissue damage varies by anatomical location; areas of significant adiposity can develop deep wounds. Undermining and tunneling may occur. Fascia, muscle, tendon, ligament, cartilage and/or bone are not exposed. If slough or eschar obscures the extent of tissue loss this is an Unstageable Pressure Injury.



Stage 4 Pressure Injury: Full-thickness skin and tissue loss
Full-thickness skin and tissue loss with exposed or directly palpable fascia, muscle, tendon, ligament, cartilage or bone in the ulcer. Slough and/or eschar may be visible. Epibole (rolled edges), undermining and/or tunneling often occur. Depth varies by anatomical location. If slough or eschar obscures the extent of tissue loss this is an Unstageable Pressure Injury.



Unstageable Pressure Injury: Obscured full-thickness skin and tissue loss
Full-thickness skin and tissue loss in which the extent of tissue damage within the ulcer cannot be confirmed because it is obscured by slough or eschar. If slough or eschar is removed, a Stage 3 or Stage 4 pressure injury will be revealed. Stable eschar (i.e. dry, adherent, intact without erythema or fluctuance) on an ischemic limb or the heel(s) should not be removed.



Deep Tissue Pressure Injury: Persistent non-blanchable deep red, maroon or purple discoloration
Intact or non-intact skin with localized area of persistent non-blanchable deep red, maroon, purple discoloration or epidermal separation revealing a dark wound bed or blood filled blister. Pain and temperature change often precede skin color changes. Discoloration may appear differently in darkly pigmented skin. This injury results from intense and/or prolonged pressure and shear forces at the bone-muscle interface. The wound may evolve rapidly to reveal the actual extent of tissue injury, or may resolve without tissue loss. If necrotic tissue, subcutaneous tissue, granulation tissue, fascia, muscle or other underlying structures are visible, this indicates a full thickness pressure injury (Unstageable, Stage 3 or Stage 4). Do not use DTPI to describe vascular, traumatic, neuropathic, or dermatologic conditions.



Additional Pressure Injury Definitions:

Mucosal Membrane Pressure Injury: Mucosal membrane pressure injury is found on mucous membranes with a history of a medical device in use at the location of the injury. Due to the anatomy of the tissue these injuries cannot be described by terminology from the staging system. These injuries are either partial thickness or full thickness.

Medical Device Related Pressure Injury: This describes an etiology of the injury. Medical device related pressure injuries result from the use of devices designed and applied for diagnostic or therapeutic purposes. The resultant pressure injury generally conforms to the pattern or shape of the device. The injury should be staged using the staging system.

Best Practices for *Prevention* of Medical Device-Related Pressure Injuries

- ✓ **Choose** the correct size of medical device(s) to fit the individual
- ✓ **Cushion** and protect the skin with dressings in high risk areas (e.g., nasal bridge)
- ✓ **Remove** or move removable devices to assess skin at least daily
- ✓ **Avoid** placement of device(s) over sites of prior, or existing pressure ulceration
- ✓ **Educate** staff on correct use of devices and prevention of skin breakdown
- ✓ **Be aware** of edema under device(s) and potential for skin breakdown
- ✓ **Confirm** that devices are not placed directly under an individual who is bedridden or immobile



ET Tube

Mucosal Membrane Pressure Injury



Trach Ties

Unstageable



Retention Sutures

Stage 3



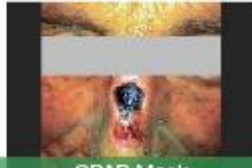
NG Tube

Unstageable



Oxygen Tubing

Stage 2



CPAP Mask

Unstageable



O₂ Saturation Probe

Stage 2



Arterial Line Tubing

Stage 2

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STOP!

PRESSURE INJURIES

Prevent Pressure Injuries

Also known as bedsores, decubitus ulcers, & pressure ulcers

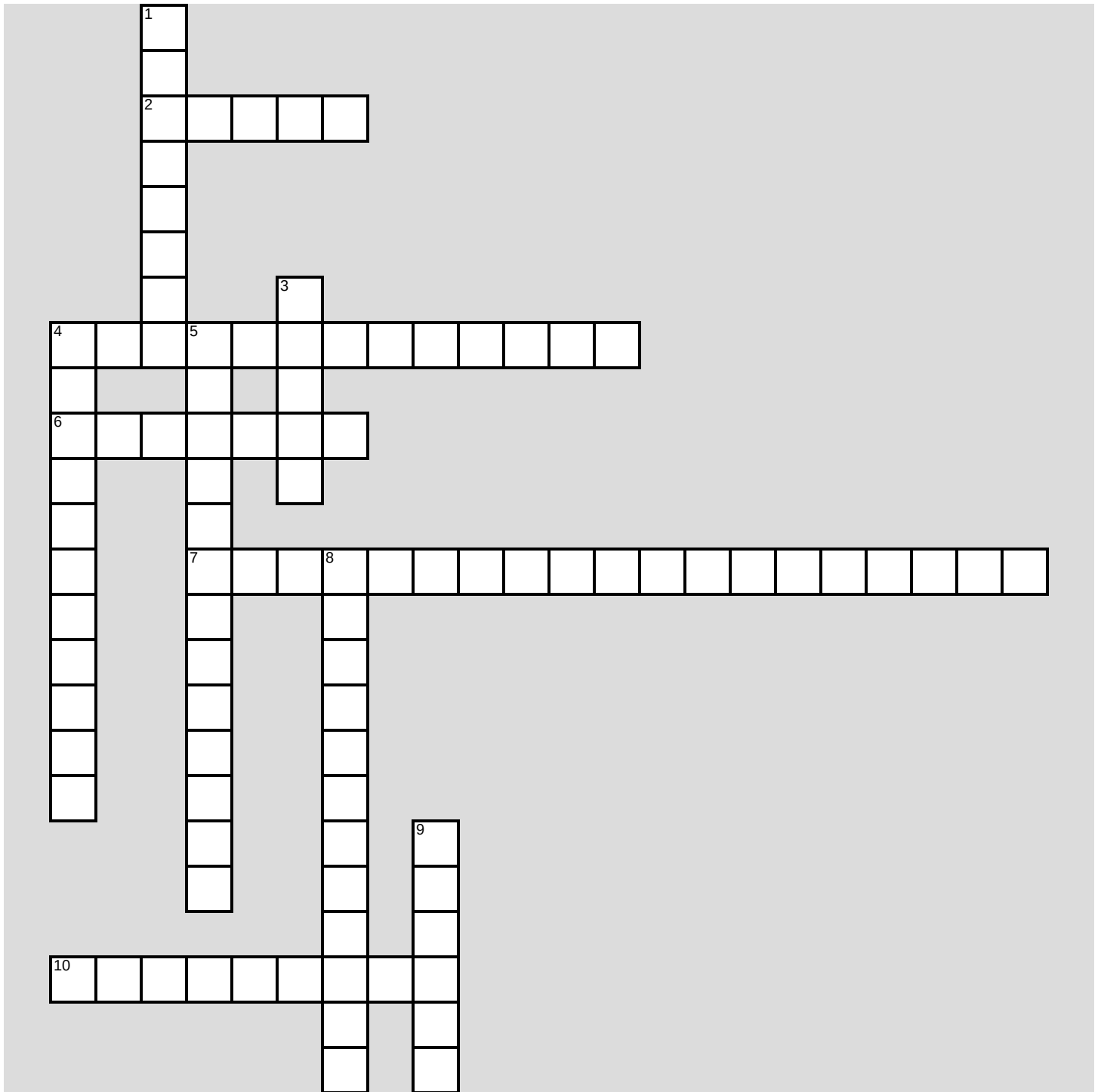
Pressure Injuries

are a major burden to patients, caregivers, the healthcare system & society

1. IS YOUR PATIENT AT RISK?
2. IMPLEMENT PREVENTATIVE STRATEGIES
3. DOCUMENT, DOCUMENT, DOCUMENT
4. REFER TO INTERNATIONAL PRESSURE INJURY GUIDELINES



Nutrition and Pressure Injury Prevention



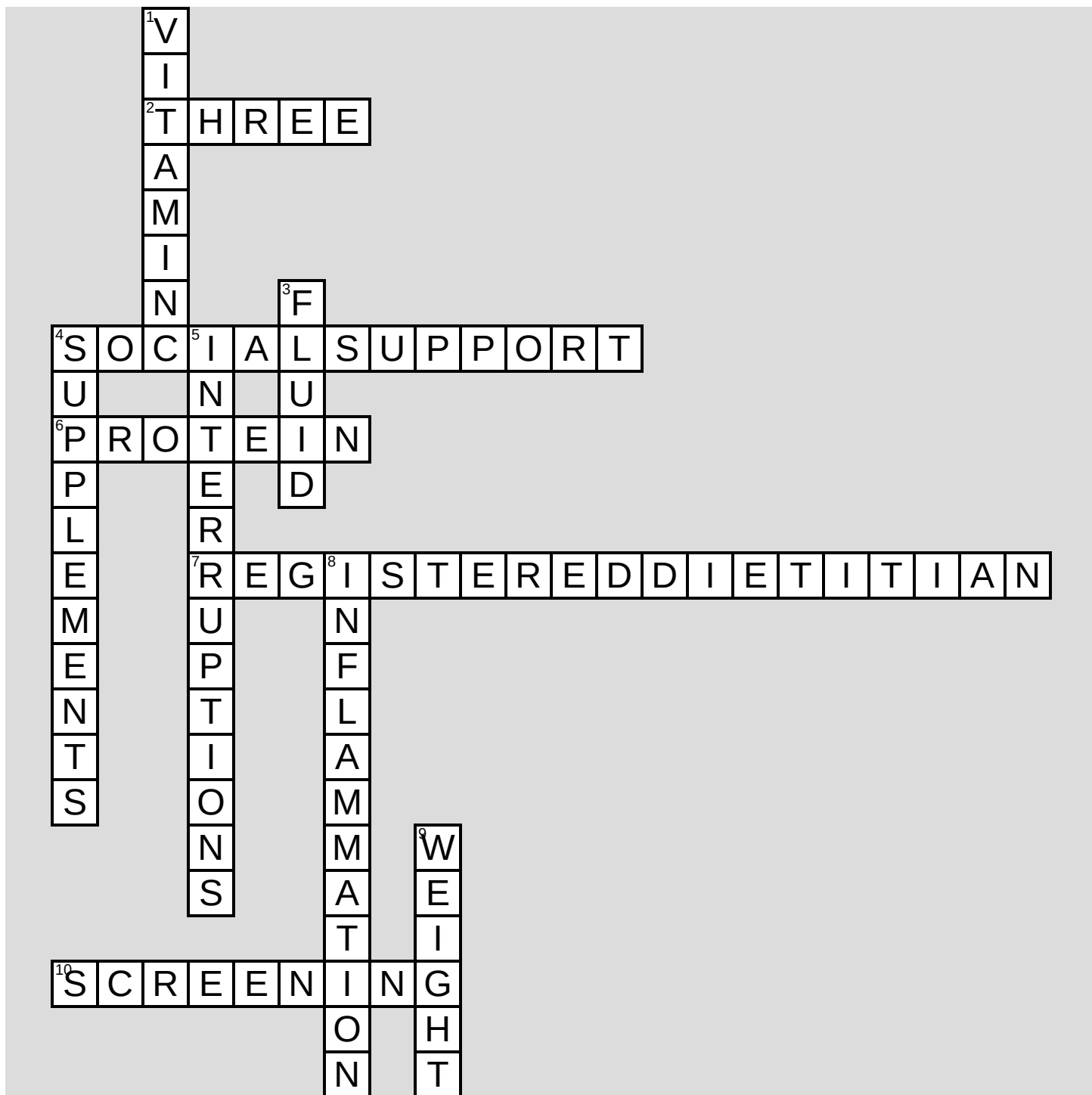
Across

- 2 Most patients/residents need a high calorie/high protein diet if they score less than ____ on the Nutrition Sub scale of the Braden Scale
- 4 One strategy to enhance the patient/resident experience of eating their meal.
- 6 Requirements of this macronutrient increase if a patient/resident is at risk or has a pressure injury.
- 7 Consult this healthcare professional when a patient/resident has been identified at risk for developing pressure injuries or has an existing pressure injury
- 10 Process in which patients/residents are identified to be at risk for malnutrition or other nutritional deficiencies

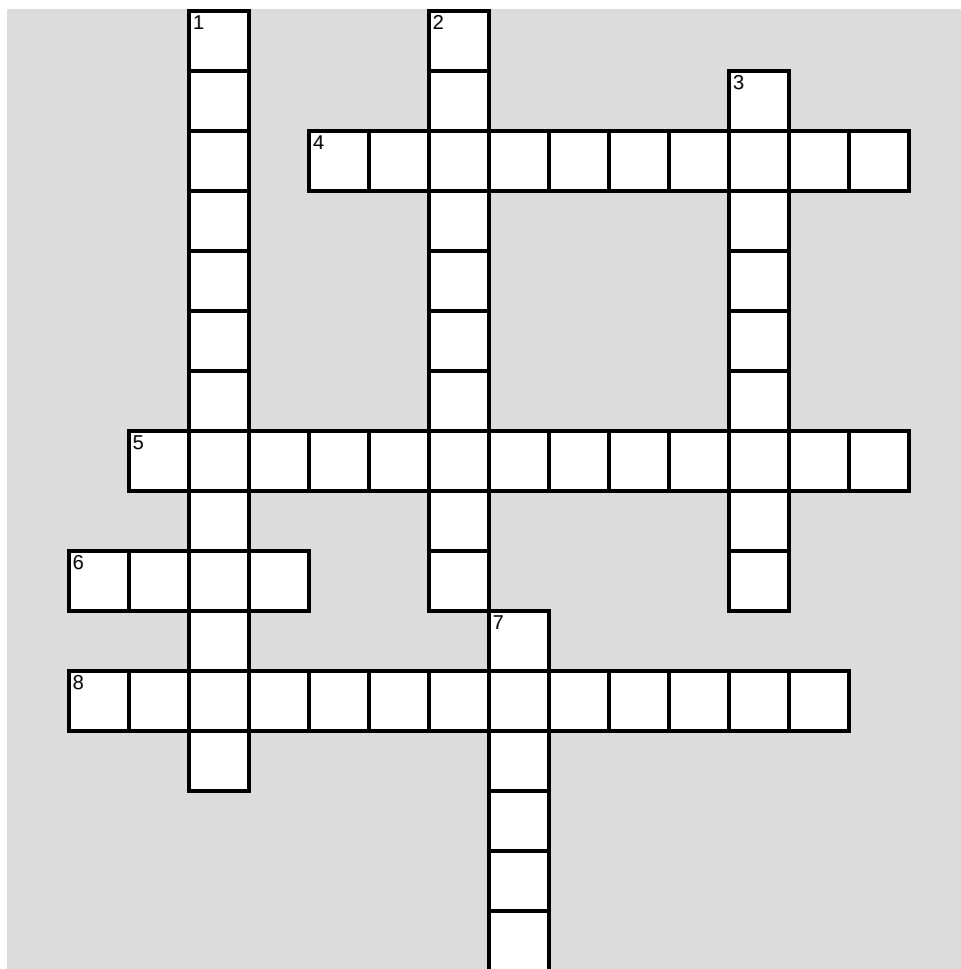
Down

- 1 Deficiency of this is known to impair wound healing
- 3 It is important patients/residents are getting the right amount of ____ because this will ensure all the nutrients move through the body.
- 4 This should be considered when adequate nutrition cannot be met through meals and fluids.
- 5 One barrier to a patient/resident eating their meal.
- 8 An underlying factor in disease progression and nutrition status decline than can lead to malnutrition
- 9 Accurately recording admission ____ helps many disciplines plan care.

Nutrition and Pressure Injury Prevention



Negative Outcomes of Pressure Injuries



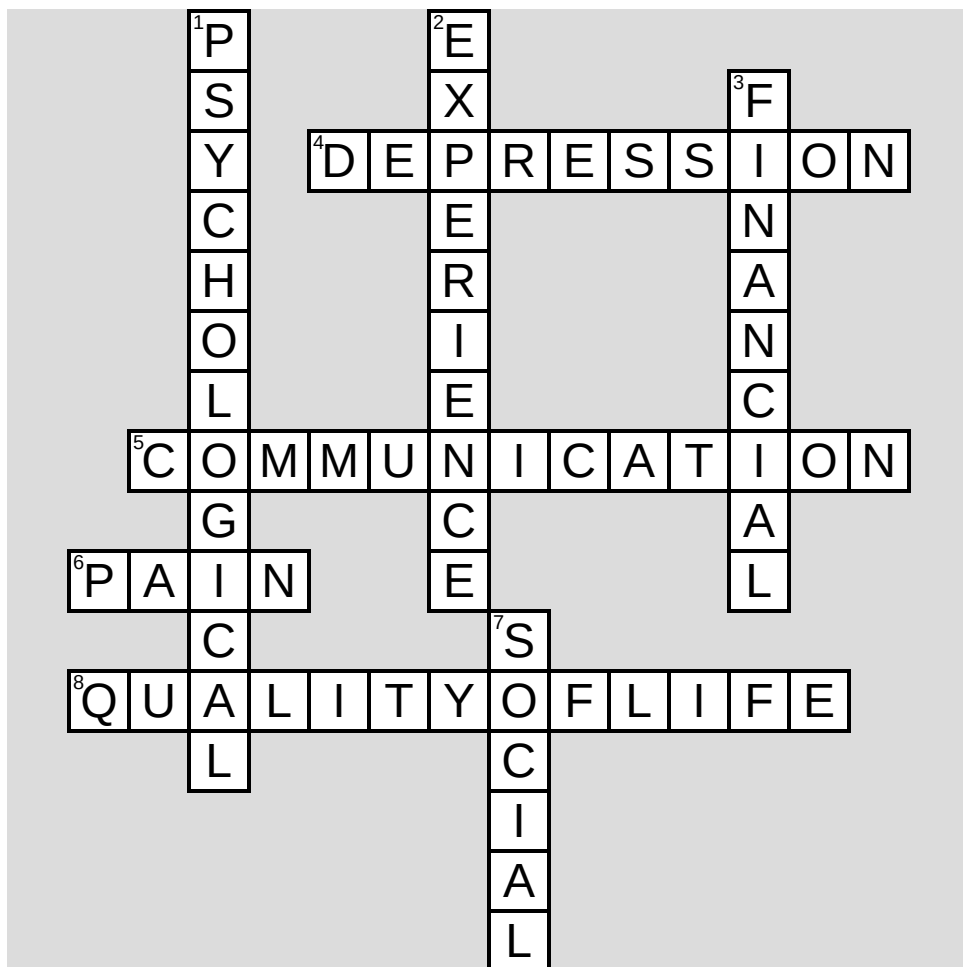
Across

- 4 The grieving process and living with a pressure injury can lead to this
- 5 An important strategy to engage patients and families in prevention
- 6 Pressure injuries contribute to _____ and suffering
- 8 This is a complex concept that relies on many factors, including contact with friends and family, enjoyable work or leisure pursuits, comfortable home and lifestyle and satisfying relationships.(all that can be negatively impacted by pressure injuries)

Down

- 1 Experiencing a pressure injury can have a physical, spiritual and _____negative impact
- 2 Understanding the phenomena of living with a pressure injury is often captured by the lived _____
- 3 Those living with a pressure injury can experience this burden
- 7 This type of support is often needed for person's experiencing a pressure injury

Negative Outcomes of Pressure Injuries



Across

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