

Preventing Pressure Sores

Promoting Healthy Skin



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Community Health Connections Mission Statement

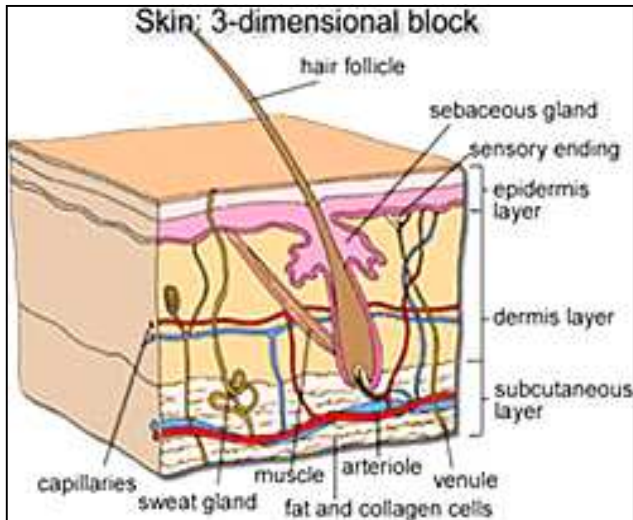
Our mission is to provide high quality training, assistance, and capacity building to benefit those with intellectual and developmental disabilities. We strive to provide our services with skill, integrity, and a genuine regard for the well-being of others.

Disclaimer

The information, suggestions and guidelines presented in this Preventing Pressure Sores reference manual are intended to educate residential providers and related staff about the significance of preventing skin breakdown. It is anticipated that by recognizing the onset of pressure sores, intervention can be initiated to prevent further skin damage.

The information contained in this manual is consistent with the concept of best practices for maintaining good skin integrity. This information is general in nature and not all-inclusive, and should not be used to replace medical advice or detailed information from a health care provider. It is not intended to replace the policies and procedures of any agency.

Skin Anatomy and Function



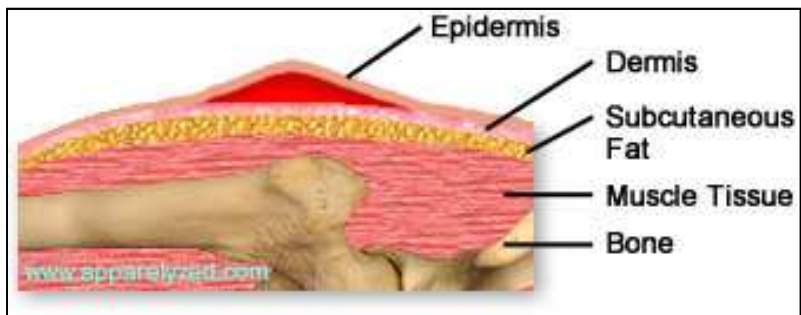
The skin is the largest organ of the body and its primary job is protection — keeping good things in and harmful things out. Additional functions of skin are to help prevent dehydration, to regulate body temperature, and to provide a barrier from infection. Skin performs best when it is free of irritations, injury or open areas. Health professionals refer to this skin state as being “intact.” It is a primary goal to maintain good integrity of the skin

over a lifetime.

The illustration above shows a cross-section of skin. Note the three layers: the subcutaneous layer, the dermis layer and the epidermis layer. Pressure Sores can damage all three layers.

What are Pressure Sores *also known as “bed sores” or “Decubitus Ulcers”*?

Pressure Sores are areas of injury to the skin and tissues under the skin due to damage from sitting or lying in one position too long. Friction and shearing occurs when the body is in contact with surfaces like bed linens, incontinence briefs, beds, chairs or mats, etc. The prolonged pressure is most



prevalent over areas where the bony parts of the skeleton come in contact with surfaces. Prolonged pressure damages tissue and reduces vital blood supply in the area. Prevention of prolonged pressure and early detection are key to keeping the skin intact.

Who gets Pressure Sores?

Anyone who has to sit or lie in one position for a long time could get a pressure sore. An otherwise healthy person who is immobilized due to illness or injury is at risk.



People who cannot move themselves are at the greatest risk such as those who have strokes, paralysis, and nerve damage. Chronic diseases such as diabetes, cancer, cerebral palsy, and problems with circulation are more risk factors. Elderly people are more prone to develop pressure sores because the layers of their skin are less dense than their younger counterparts.



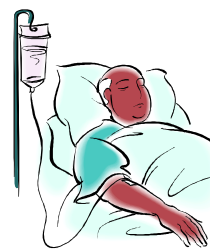
Those with bowel and bladder incontinence are also prone to pressure sores because this leaves the skin damp and more likely to break down.

Are Pressure Sores serious?

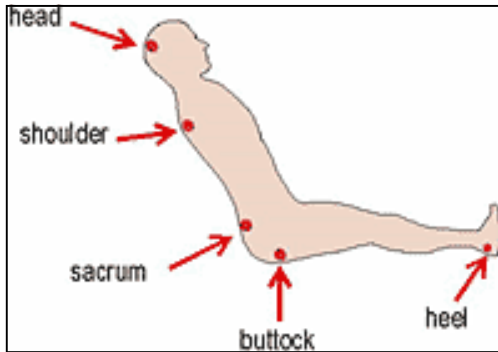
Pressure Sores are absolutely serious and are a significant threat to health and safety.

Complications from Pressure Sores can lead to serious infections and even death. Pressure Sores develop quickly, progress rapidly, and are often difficult to heal.

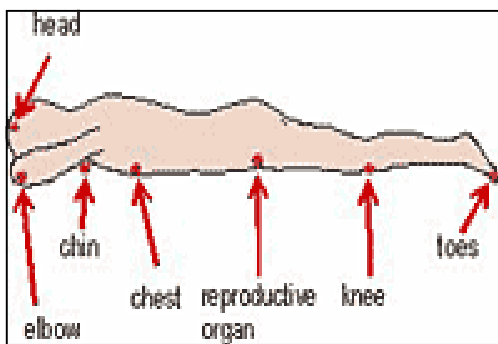
In fact, Pressure Sores are so costly to treat and heal that insurance companies are going to start questioning payment for new sores that develop during hospital stays. With good monitoring and care, however, they can be prevented.



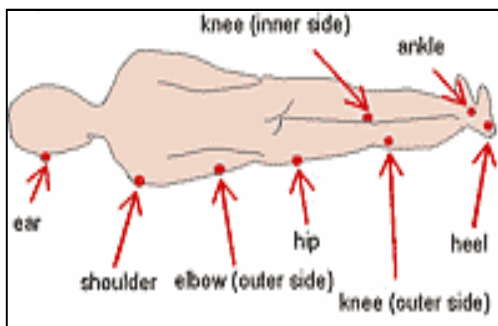
Some Common Locations of Pressure Sores



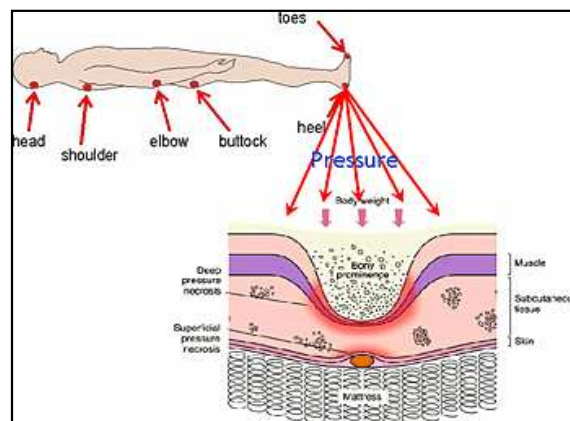
The illustrations to the left show several common sites where pressure sores can develop. The picture below and to the right shows a cross section of a pressure sore that has developed on a person's heel as he laid on his back. You can see how deep the damage can go, even down to the bone.



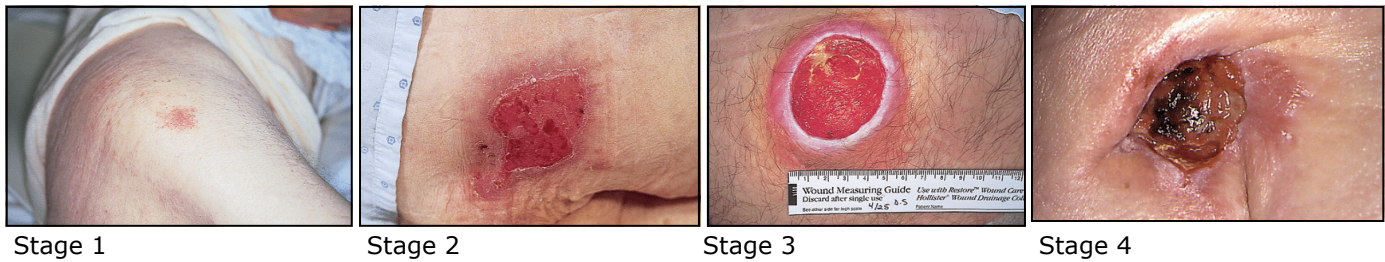
If someone spends a lot of time in a wheelchair, usually areas over the tailbone, buttocks, and shoulder blades get significant pressure. It is also important not to overlook skin covering the spine, behind the bended knee or the elbows.



If someone spends a lot of time in bed, the areas over the tailbone and hips are very vulnerable to pressure. Other areas include the back of the head, ears, shoulder blades, lower back and the back and sides of the legs. Remember that if anyone is incontinent of bladder or bowel, the dampness from waste products helps break skin down and provides a major source of infection.



Stages of Pressure Sores



The first sign of a pressure sore is a *redness* over a pressure point that does not go away when the source of pressure has been removed.

These red areas can develop very quickly, sometimes in a matter of hours. A person who is unable to turn in bed could easily develop a reddened area overnight and be at risk for a pressure sore. These sores are painful and uncomfortable often leading the person to ask for help. If someone is unable to feel pain due to nerve damage, injury or chronic illness, then they are unable to communicate this important signal of alarm.

If the pressure is not relieved, the damage to the tissues “digs” deeper and deeper into the skin. The skin on the surface opens and becomes a wound, which can become infected with drainage, fever, etc.

Physicians diagnose pressure sores by severity, that is, by the depth of the damage to the skin thickness or layers. The National Pressure Ulcer Advisory Panel has defined Stages for diagnosis:

Suspected Deep Tissue Injury— Purple or maroon area of discolored skin that is intact. Also could be a blood-filled blister.

Stage 1— Redness that does not go away, skin is not open yet.

Stage 2— Ulcers that are not very deep with loss of outer layers of skin; underlying, still developing skin tissue, or both.

Stage 3— The open area has deepened into the layer of fat tissues of the skin.

Stage 4— The open area has now deepened into the deep layers under the skin, involving muscle and bone.

Unstageable— Full thickness tissue loss in which the base of the ulcer is covered by dead skin. The dead tissue must be removed to be able to classify the stage.

Treatment Depends Upon The Amount Of Damage

How Are Pressure Sores Treated?

Three things help pressure sores heal:

1. Relieving the pressure that caused the sore
2. Treating the sore itself
3. Improving nutrition and other conditions to help the sore heal



Take The Pressure Off

Much can be done by eliminating the time pressure has on the area. No more than two hours should elapse before changing position, whether in a wheelchair or in bed. Physicians or nurses may recommend special bedding, cushions or other products that can help relieve pressure. Still, nothing is as effective as getting pressure off the affected area by turning, moving or changing position.

Once the damage has progressed beyond redness, then special medicated dressings, antibiotics and pain medication may need to be ordered. Healing is influenced and affected by the decreased circulation to the area.

At times Pressure Sores are so deep and have such damage that surgical procedures may be necessary to remove all materials that promote infection and interfere with healing.

Treatment is impacted by the person's general health, immune system, level of immobility, chronic illness and age.

The Physician should be notified as soon as you see redness over an area and it does not go away when the pressure is removed. The treatment plan starts at this stage of redness.

Skin Assessment And Observation

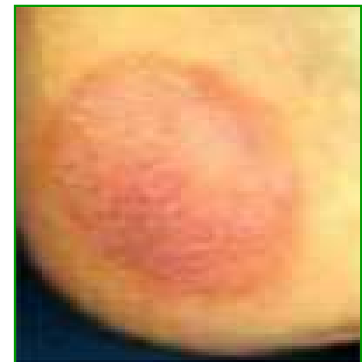
Be Observant

Your value to someone with a disability cannot be underestimated. Taking a few moments a day to observe for skin breakdown is vital to promoting and maintaining good skin health for the person you support. This can spare someone in your care the experience of significant pain and dramatically reduce the risk for serious complications stemming from skin breakdown.

“Take time for all things - great haste makes great waste.” Benjamin Franklin

Observing Is An Ongoing Process

A total body assessment is usually completed as part of many admission processes. This is also frequently done when a person is first admitted to a provider agency and to their new residence. This is often completed by a licensed medical professional at the agency or by someone who is designated to complete a basic skin assessment form. We have included a sample skin assessment form in this manual. You may copy and use this form or choose another form that best suits your needs.



A skin care assessment should also be completed before and after someone is in the hospital or nursing home. We would recommend using a skin assessment form just prior to a person being hospitalized, and just after they return from the hospital.

People who spend most of their time in a wheelchair or in bed need their skin checked frequently, at least every two hours when their position is changed.

Observing Is An Ongoing Process: Other Considerations

- ⇒ People who are incontinent of bladder and/or bowel should have their skin assessed several times a day, even if they do not have limited mobility.
- ⇒ Remember those who are not able to voice their discomfort. They also need their skin assessed several times a day.
- ⇒ If you can stop pressure damage in the **redness** stage, it is possible to prevent further complications.
- ⇒ Protect an affected area from any more pressure, but do not attempt to provide treatment without the orders of a medical professional.
- ⇒ Please be mindful of long fingernails. Not only can long nails scratch the person in your care, but they can harbor and transmit harmful germs.
- ⇒ Remember to respect the person's sense of modesty. Always ask permission to do an assessment and then explain what you are doing and why. Maintain privacy at all times.

Risk Assessment

Identifying risk factors for the development of Pressure Ulcers is a good starting point to developing a plan of prevention to keep skin healthy.

Good Nutrition and Hydration

Having adequate nutrition and hydration is vital to health and safety, even for skin. These factors are also crucial to the prevention and healing of pressure sores. Talk with a physician or nurse for guidelines to improving and correcting areas of concern. Consider asking for a consult with a Registered Dietician to help develop a nutritionally balanced diet and support plan.

Adequate protein is essential for tissue building and wound healing. The physician may order multivitamin or mineral supplements. Offer glasses of water whenever you can, such as with position changes (every two hours), and meals.

Risk Factors

- *Decreased mental status*
- *Exposure to moisture*
- *Incontinence*
- *Friction/shearing*
- *Immobility*
- *Inactivity*
- *Poor nutrition*
- *People who use tube feedings*
- *Poor hydration*
- *Chronic illness*

Incontinence And Hygiene

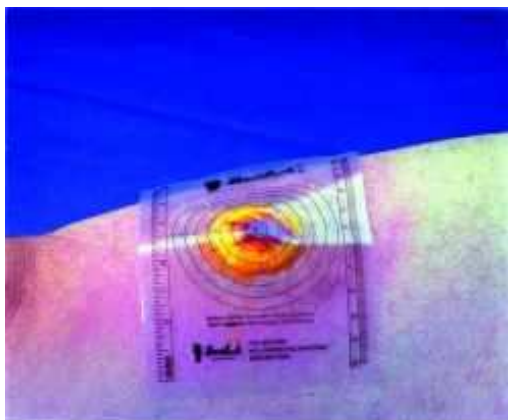
When someone is incontinent, their skin must be checked several times during the day, for example: First in the morning; each time adult briefs are changed; afternoon prior to evening meal; and bedtime. While it is important to use adult incontinence briefs that are absorbent, there is a great risk for skin breakdown if they are left on without being changed in a 6 to 8 hour time period.

Skin care for people with incontinence includes cleanliness. Bathe the person's skin at the time of soiling. If left un-bathed, the skin is subjected to prolonged moisture and harmful elements that can quickly cause the skin to break down. The physician or nurse may tell you to use a protective salve that is a moisture barrier as a further means of prevention and treatment.

Avoid rubbing

You can cause damage to the skin tissues if you massage over pressured areas, so avoid this practice. Contrary to some beliefs, you are not 'increasing circulation' to the area. Instead, you are adding compression and friction to areas that are already damaged. If you need to use moisturizers or salves, apply them very gently without a lot of pressure.

Measuring Guide



A disposable measuring guide like the one illustrated on the left is used to measure the size any wound, including a pressure sore. Using a measuring guide is helpful when completing a skin assessment or communicating the extent of skin damage. This is a disposable, one-time-use only, tool. You may order measuring guides for a low cost at many medical supply stores or online. To order a free sample from Community Health Connections, please see instructions on page 15.

Body Check Assessment

On the following page there is a sample of a body check assessment form. It has the important components reviewed in this manual that give information about a person's skin status.

When Should A Body Check Assessment Be Completed?

This is a policy determined by your agency. The following are situations when it would be appropriate to complete a body check assessment:

- ⇒ A new admission into the agency
- ⇒ Upon changing residence from one home to another
- ⇒ Prior to going to the hospital (admission)
- ⇒ Prior to going to a nursing or convalescent home
- ⇒ Returning from the hospital (from inpatient stay)
- ⇒ Returning from a nursing or convalesce home
- ⇒ Discharge from the agency

The following are situations when it would be appropriate to complete periodic assessments (i.e. daily, weekly, monthly). The frequency will be dictated by individual situations and needs.

- ⇒ Incontinence of bowel and/or bladder
- ⇒ Immobility-bed bound or chair bound
- ⇒ Chronic illness
- ⇒ Long term injury
- ⇒ Receiving tube feedings



BODY CHECK ASSESSMENT SHEET

Consumer Name: _____

Date: _____ **Time:** _____ **Doctor:** _____

Accurate weight: _____

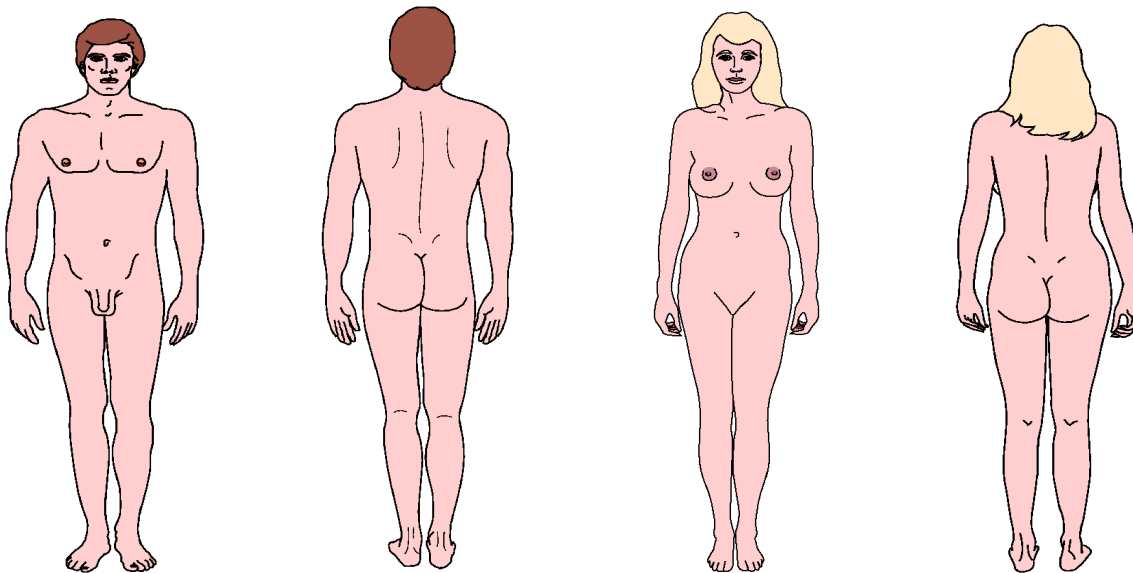
Are they on tube feedings? _____

Purpose (please check)

| | | |
|---------------|-----------------------|--------------------------|
| New admission | Going to hospital | Return from hospital |
| New residence | Going to nursing home | Return from nursing home |
| Incontinent | Bed bound | Chair bound |
| Injury | Illness | Other |

Place the appropriate symbol on the picture where the mark is located on the person.

Bruise (#) **Redness (*)** **Open area (O)** **Burn (B)** **Scrape (+)**



Initial what you observe:

| Bruising | Redness | Open area | Burn | Scrape |
|-----------------|----------------|------------------|-------------|---------------|
| Yellow | Pink | Seeping | Red | Skin closed |
| Green | Red | Scabbed | Blister | Seeping |
| Purple | Soft | Dry | Seeping | Dry |
| Fading | Size | Swelling | Dry | Swelling |

Do red areas go away easily? _____

Can this person change their position independently? _____

Staff signature: _____ Who notified: _____

References/Resources

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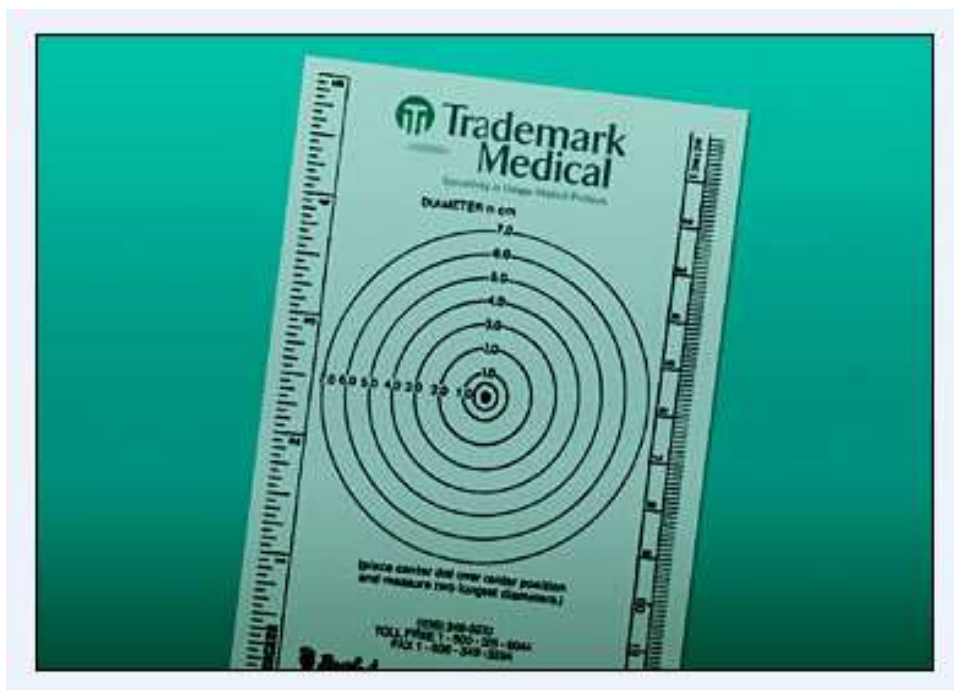
Illustrations on pages 4, 5 and 7 credited to: www.pele.com.tw/image/stage.jpg

Enterstomal Therapy Nurses, also called Wound Care Nurses are specialists in recognition, treatment and prevention of pressure sores. For more information on how to access these specialty nurses, please contact your physician, local hospital or home health care agency.



How to obtain a free sample of a measuring guide:

If you downloaded this Skin Care Manual from our website and would like a free sample of the Measuring Guide referenced on page 11, you can request one through the "Ask the HCQU" feature of our website. Simply fill out your name and address and type "Send me free Measuring Guide!" in the question box. A sample will be sent to you within 3 business days.



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