* **Table 1 risk factors of pressure ulcer in operating room**

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| evaluation item | **Assessment rules** | | | | **Score** |
|  | 1Points | 2Points | 3Points | 4Points |  |
| Age | ＜50Year | 50~64Year | 65~79Year | ≥80Year |  |
| Weight | Normal | Lightly emaciated or overweight. | Moderate thinning or obesity. | Heavy weight loss or obesity. |  |
| Stress point skin | In good condition | Erythema and/or moist. | ecchymosis and/or blister. | Damage |  |
| Surgical position | Supine position | Local anesthesia prone or lateral position. | Slope lying position, stone cutting position. | General anesthesia prone position. |  |
| An external force is expected to be applied during the operation. | No external force is applied. | There is friction or shear. | Impact force | There is also friction.Shear and impact forces. |  |
| Estimated operating time | ＜3h | 3~4h | ＞4hand ≤5h | ＞5h |  |
| Estimated surgical bleeding | ＜500ml | 500~1000ml | ＞1000and ≤1500ml | ＞1500ml |
| Special surgical factors | General anesthesia prone position, the patient's face skin thin, swollen, thin, plus.3Points | | | |  |
| Controlled hypotension, hypothermia anesthesia, plus.3Points | | | |  |
| Other conditions (e. g. shock, edema, severe trauma) are added as appropriate.1~4Points | | | |
| **Total** |  | | | |  |

**Remarks: ForAge>50Years, operation time >.3h, weight >180kgor <35kgSpecial position and other surgical patients.Must be assessed**

**1Standard Weight:**Height(Centimeters)―105=Weight(Kg). When the body weight is lower than the standard weight.20%Slightly thin(fat).;When the weight is below (above) the standard weight.30%Being moderately emaciated (obese); when the weight is below (above) the standard weight.40%It is severe wasting (fat).

**2受力点皮肤**The skin condition of the actual focus after the placement of the surgical position.

**3The external force applied during the operation.**:During operation, adjust the angle and direction of the operating table and the external force applied by the internal fixed chisel, hammer, pulling and pressing.

**4Special surgical factors**. According to the type of operation and the incidence of acute pressure sore, the relationship between anesthesia method and the position of pressure sore,3A subjective assessment of facial skin was used as an additional score.60~70mmHg, the elderly reduced to80mmHg

**5Cumulative total of entries,12It is divided into high hazard, ≥.13Very dangerous.The higher the score, the higher the risk of pressure sore,≥.13The corresponding nursing measures must be taken.**

**Preventive measures for high risk patients with pressure sore in operating room.**

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| **Intraoperative nursing** | |
| Reduce shear and friction forces. | The sheets are flat and wrinkle - free.  Position pad and skin smooth, no wrinkle, no skin extrusion.  To control the frequency and angle of the shaker during operation.  The restraint band is soft, smooth and tight.  Other |
| Use of pressure relief appliances. | Absorb skin  Position pads  Where conditions permit, separation.1hLightly lift the compression part to relieve local pressure.  Other |
| Skin Care | Warmer: WarmerCover coverConstant liquid temperatureIn front of the shop、Adjust the room temperature after the surgical suture.  Prevent disinfectant from soaking the skin outside the disinfection area.  Keep the surgical napkin dry and flat.  Protection of the cornea  Orbital, auricle free from pressure.  Other |
| Posture observation and nursing. | Secure fixation  Avoid body displacement after shaking the bed during operation.  Stabilize the position, stretch the limbs and support the joint with cushion.  Limb function position  The limbs have no contact with metal.  There is no pressure on the electrode lines of each pipeline.  Other |

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| **Postoperative nursing** | |
| Check skin | In good condition |
| Pressure sore:Part IPhase IIIII.IVNot installableDeep tissue damage  Position: |
| Post-operative handover | Key handover with ward nurse.,Remind nursing staff to take targeted pressure sore precautions.,Prevent postoperative pressure sore or development. |
| Cause analysis |  |
| Rectification measures |  |