

Reducing a Patient's Risk for Pressure Injuries



Pressure injuries are sores or wounds that develop due to ongoing pressure on a part of the body. They may be seen in people confined to a bed or wheelchair. Once developed, pressure injuries may not heal easily, especially when treated in their advanced stages. Good preventive care is essential to lower the risk of developing these injuries in the first place. There is, however, no single preventive for pressure injuries. Give priority to pressure relief. Reduce other risks to help maintain a healthy flow of nutrients to the patient's skin.

Promote good nutrition

Cells regenerate more quickly when nutrition is supplemented. To identify malnutrition, weigh the patient and review blood test results. Keep a track of what they eat and drink and any artificial nutrition. Use a proper malnutrition risk assessment tool for the patients. Consult with a dietitian or nutritionist about any dietary adjustments. They may recommend you:

- Feed the patient more frequently.
- Offer foods high in protein and calories.
- Give vitamin supplements.
- Use tube feedings, if necessary.

Relieve pressure

Relieving pressure is the single most important factor in preventing and treating pressure injuries.

You can relieve pressure and restore the skin's blood supply by repositioning the patient and using devices such as special kinds of beds, pillows, mattresses, cushions, or overlays. When selecting a support device, take into account consider factors such as the patient's body size, degree of immobility, shear exposure, skin moisture, and blood flow. Post a schedule to remind you to reposition the patient—from side to back or from stomach to side. Make minor position changes even more frequently.

In a bed

- Use pillows under the calves to elevate the legs from above the knees to the ankles.
- Put a pillow or foam pad between the knees and ankles when the patient is lying on their side.
- Alter the angles of arms and legs.

In a wheelchair

- Be sure the wheelchair is the proper size for the patient to give optimal support. For example, if the seat is too narrow, it will put extra pressure on the hips and thighs.
- Cushion the back and buttocks with pillows or wheelchair cushions, and pad the footrest.
- Use a special wheelchair cushion that is designed to distribute weight evenly and relieve pressure points.
- Have special cushions tested and adjusted at the proper times as recommended by the manufacturer. This will allow the pressure relief to remain effective.

Manage moisture

Keep skin clean and lubricated, but free of excess moisture. Put the patient on a regular toilet schedule. Use incontinence devices, if appropriate. Consult with a healthcare provider about using diarrhea medicines:

- Use talc-free powders or barrier creams.
- Place towels between skin folds.
- Pat the skin dry after bathing.
- Lubricate skin with lotion.

Reduce shear and friction

Prevent skin breakdown by reducing friction and shear. Patients are less likely to slide down in bed if they're supported by pillows and the head of the bed isn't raised too high. During bed or wheelchair transfers, lift—don't drag—the patient. If you can't do this alone, get help. And be sure to use assistive devices, such as a mechanical lift device, whenever possible.

In a bed

- Use draw sheets, transfer boards, or mechanical lift devices to move patients.
- Clean and smooth the bed surface.
- Lift the head of the bed no more than 30°.
- Raise the foot of the bed slightly.

In a wheelchair

- Support the patient's back with a pillow.
- Use a padded foot extension.

© 2000-2027 The StayWell Company, LLC. All rights reserved. This information is not intended as a substitute for professional medical care. Always follow your healthcare professional's instructions.
This information is not intended as a substitute for professional medical care. Always follow your Healthcare professional's instructions. Copyright Krames LLC.