

MODIFIED BRADEN SCORE FOR PREDICTING PRESSURE ULCER RISK

RISK FACTOR	DESCRIPTION				SCORE					
SENSORY PERCEPTION Ability to respond meaningfully to pressure-related discomfort.	1. COMPLETELY LIMITED • Unresponsive • Limited ability to feel pain over most of body.	2. VERY LIMITED Responds only to painful stimuli.	3. SLIGHTLY LIMITED Responds to verbal	4. NO IMPAIRMENT • Responds to verbal commands. • Has no sensory deficit						
ACTIVITY Degree of physical activity	1. BEDFAST Confine to bed	2. CHAIRFAST Cannot bear own weight and/or need assistance to ambulate.	3. WALK OCCASIONALLY • Mostly bed/chair rest • Walk occasionally for very short distance with or without assistance.	4. WALKS FREQUENTLY Walks independently						
MOBILITY Ability to change and control body position	1. COMPLETELY IMMOBILE Totally dependent	2. VERY LIMITED Unable to make frequent or significant change independently.	3. SLIGHTLY LIMITED Able to move/position body or limbs frequently.	4. NO LIMITATION						
MOISTURE Degree to which skin is exposed to moisture	1. CONSTANTLY MOIST Constantly moist with sweat, urine, etc.	2. VERY MOIST • Frequently moist • Linen must be changed at least once a shift	3. OCCASIONALLY MOIST Occasionally moist and need to change linen once a day.	4. RARELY MOIST						
FRICTION AND SHEAR Friction – occurs when skin moves against support surfaces. Shear – occurs when skin and adjacent bony surface slide across one another.	1. SIGNIFICANT PROBLEM • Immobile requiring maximum assistance in lifting, re-positioning and unavoidable sliding and friction. • Agitation leads to almost constant friction.	2. PROBLEM • Requires minimum assistance. • Occasionally slides down on chair or bed.	3. POTENTIAL PROBLEM Maintains relative good position in chair or bed most of the time but occasionally slides down.	4. NO APPARENT PROBLEM Moves in bed and chair independently.						
NUTRITION Usual food intake pattern	1. VERY POOR • Rarely eats more than 1/3 of any food offered. • Takes oral fluids poorly. • NBM &/or maintained on clear fluids, or IV's for more than 5 days OR albumin < 25mg/l.	2. INADEQUATE • Generally eats only about 1/2 of any food offered. • Occasionally will take a dietary supplement.	3. ADEQUATE • Eats ¾ plate the meals every meal. • Is on tube feedings or TPN which provide adequate calories and minerals for age.	4. EXCELLENT • Eats most of every meal. • Does not require supplementation						
TISSUE PERFUSION AND OXYGENATION	1. EXTREMELY COMPROMISED • Hypotensive (MAP < 50mmhg: < 40 in a newborn) OR the patient does not physiologically tolerate position changes.	2. COMPROMISED • Normotensive • Oxygen saturation may be < 95% OR hemoglobin may be < 10mg/dl OR capillary refill may be > 2 seconds. • Serum pH < 7.40.	3. ADEQUATE • Normotensive • Oxygen saturation may be < 95% OR hemoglobin may be < 10mg/dl OR capillary refill may be > 2 seconds. • Serum pH is normal.	4. EXCELLENT • Normotensive • Oxygen saturation may be > 95%. • Normal hemoglobin. • Capillary refill < 2 seconds.						
TOTAL SCORE*										
Ward / Unit										
Signature										
Date										
Time										
Patient at Low Risk	Patient at Risk/ Mild Risk	Moderate Risk	High Risk	Very High Risk						
24 - 28	16 - 23	13 – 15	10 – 12	9 or below						