

# Pressure Injuries: Guidelines for Assessment and Treatment in Adults & Children

## Site Applicability

All VCH Sites

## Practice Level

Basic skill for the following professions (within their respective scope of practice)

- NP, RN, RPN, LPN

## Policy Statement

VCH nurses will follow the Decision Support Tool (DST) developed by the Provincial Nursing Skin & Wound Committee (see guideline link below) when providing this wound care.

## Need to Know

The Provincial Nursing Skin and Wound Committee (PNSWC) developed this DST to provide a provincial standard for wound care for all patients, clients and residents who develop a pressure injury. The PNSWC has also developed an educational resource to assist with the correct staging of pressure injuries, see [Related Documents](#) section below.

In 2016, the National Pressure Ulcer Advisory Panel (NPUAP) released its new guidelines which included a rewording of 'pressure ulcer' to 'pressure injury'.

The NPAUP 2016 revised pressure injury definitions now include medical-related pressure injury and mucous pressure injury.

## Guideline

The Provincial DST **Guideline: Assessment and Treatment of Pressure Injuries** provides detailed guidance on how to assess and stage a pressure injury, as well as, lays out specific care plans for each of the pressure injury stages.

- Guideline: [Assessment and Treatment of Pressure Injuries in Adults & Children](#)
- Guideline Summary: [Assessment and Treatment of Pressure Injuries in Adults & Children](#)

## Expected Patient/Client/Resident Outcomes

Patient/client/resident will have his/her pressure injury appropriately assessed and staged; based upon the pressure injury stage, the appropriate care plan will be used to promote wound healing.

## Documentation

The pressure injury stage, the initial and ongoing wound assessments/treatments are to be documented on the Wound Assessment & Treatment Flow Sheet (WATFS) or within Picalere electronic Wound module or within Cerner EMR.

When a pressure injury occurs, the event is to be documented in the Patient Safety Learning System.

## Related Documents

- Guideline: Prevention of Skin Breakdown due to Pressure, Friction/Shear and Moisture in Adults & Children (*this is a provincial DST pending VCH/PHC endorsement*).
- HCP Educational Resource: [How to Stage Pressure Injuries](#)

## References

See Guideline document.

<b>Effective Date:</b>	14-June-2022	
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<b>Approved By:</b> (committee or position)	PHC	VCH
	Professional Practice Standards Committee	Vice President Professional Practice and Chief Clinical Information Officer
<b>Owners:</b> (optional)	PHC/VCH	
	<p>The Provincial Nursing Skin and Wound Committee in collaboration with Regional Skin &amp; Wound Committees from NHA, IHA, FHA, VIHA, PHSA &amp; VCH/PHC.</p> <p>VCH/PHC representatives on the Provincial Nursing Skin &amp; Wound Committee:</p> <p>NSWOC CWOCN, Lions Gate Hospital  NSWOCN CWOCN, Vancouver Community  WOC Nurse, Vancouver General Hospital  Wound Clinician, Richmond Community  CNS, NSWOC, Providence Health Care  NSWOC, VCH Professional Practice Lead - WOC Nursing</p> <p>*NSWOC = Nurse Specializing in Wound Ostomy Continence</p>	