A Multi-faceted Approach To Reduce Pressure Injuries During Noninvasive Ventilation.

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**Conclusions**

What was our current status:
- Lack of a systematic and consistent clinical management of NIV
- Lack of well-designed plan to manage the chronic or refractory NIV patient
- Lack of clearly defined clinical end-points germane to NIV management
- Increase of pressure injuries associated with NIV utilization

**Countermeasures**
- Development of interdisciplinary team
- Replaced existing mask with one that allowed for a more comfortable and flexible fit
- Enhanced RRT/RN NIV mask application education
- Perform daily NIV rounds by Respiratory Educator to support practice changes
- Development of a Non-invasive ventilation practice guideline approach to NIV clinical management—with specific clinical end-points
- Utilized an enhanced skin barrier specifically designed for use under the mask
- Instituted an alternative mask strategy

The results are a combination of factors including:
- Enhanced education
- Daily NIV rounds
- Well-defined NIV clinical management end-points
- Utilization of enhanced skin barrier
- Application of well-designed NIV masks

**Future Endeavors**

- Perform daily NIV rounds
- Provide education for ALL new staff
- Continue to seek additional countermeasures as needed

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