An Interdisciplinary Approach to Reducing Pressure Ulcers in the Geriatric Trauma Population

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Geriatric trauma patients are at high risk of developing pressure ulcers post trauma. Pressure ulcers represent a significant morbidity and cost in trauma patients, with reported morbidity incidence rates of up to 20%.

**Background**

Pressure ulcers are associated with:
- Functional decline
- Prolonged length of stay
- Increased health care costs +$43,180/hospital stay
- Readmissions
- Morbidity and mortality

**Goal**

Implement a multidisciplinary performance improvement (PI) project to decrease pressure ulcers

**PU Prevention Project**

**PROJECT DESIGN**
- Pressure Ulcer (PU) Prevalence Studies
  - Occurrences and Rates

**SETTING**
- 30 bed medical-surgical trauma unit in an academic, community Magnet® hospital’s Level I Trauma Center.

**Implementation Plan**

**Education**
- Unit-based Performance Improvement Committee
- Unit Champions
- Wound Care Nursing Meeting
- Re-education of all unit staff
  - Staging of ulcers
  - Skin assessment
  - Wound care nurse consultation
  - Chair cushions for all patients at risk
  - Barrier creams, adhesives
  - Turning/repositioning
  - Documentation of meal completion
  - Braden scoring
  - Communication of skin risk on white boards
  - Patient and family education

**Interventions**
- Twice daily huddles
  - Identify patients at risk
  - Ensure appropriate interventions are in place
- Underpad linen levels decreased
  - Increased layers of linen increase the risk of skin breakdown by 20-25%
- Nutrition in-services
- Current nutrition consultation revised

**Results**

**Total Pressure Ulcers**

**Pressure Ulcers**

**Pressure Ulcers Rate**

**PROJECT DESIGN**

**SETTING**

**References:**


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