



**This is a guide only and does not
replace clinical judgment**

References:

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Pressure Injuries

Information for health professionals



Pressure Injuries

Assessment

- All clients should have a risk assessment using a validated tool, performed and documented:
 - on admission
 - at regular intervals thereafter
 - following any change in health status
- Assessment should be done by staff with training and expertise in the area
- Assess the skin of at risk clients daily
- Regularly assess and document wound characteristics, including: location, size, stage, signs of infection, wound bed, undermining
- Regularly assess clients with pressure injuries for pain with a validated pain assessment tool

A pressure injury is a localised injury to the skin and/or underlying tissue, usually over a bony prominence, as a result of pressure, or pressure in combination with shear and/or friction



Risk Factors

- Immobility or reduced physical mobility
- Loss of sensation
- Impaired cognition
- Presence of constant moisture on skin
- Poor nutrition and hydration
- Dry skin
- Acute or severe illness

Management

- Pressure-relieving surfaces and strategies should be in place 24 hours per day for all individuals with pressure injuries
- Avoid positioning individuals directly on pressure injuries or bony prominences
- A high specification reactive (constant low pressure) or active (alternating pressure) support surface should be used for clients with pressure injuries
- If there is no progress in healing, or a stage 3–4 injury (or unstageable or deep tissue injury) is present use an alternating pressure, low-air-loss, continuous low pressure system or air-fluidised bed
- Limit the amount of time in bed with the head of bed elevated

- Irrigate the wound with a neutral, non-toxic solution, and cleanse with minimal trauma
- Debride necrotic and devitalised tissue. Debridement should only be performed by staff with training and expertise.
- The following interventions may promote healing in combination with regular care:
 - topical negative pressure therapy
 - electrotherapy
 - pulsed electromagnetic therapy
- Provide high protein nutritional supplements, including arginine supplements

Prevention

- All clients at risk should have a preventive management plan
- Provide a high specification reactive support foam, or active support mattress, for clients found at risk
- Avoid irritating substances on the skin and moisturise dry skin
- Off-load pressure on heels for clients at risk
- Avoid vigorous massage over bony prominences
- Use pillows and foam wedges to reduce pressure on bony prominences
- Avoid prolonged sitting in a bed or chair
- Avoid foam rings, donuts, non-medical grade sheepskin, or fluid filled bags
- Reposition the client as frequently as required, considering their risk
- Maintain optimal nutritional status
- Educate clients and carers on ways to minimise risk