## **Decubitus Ulcer** (Pressure Ulcer)

Patient name:			_ Admission:
NRS E INITIAL I.	<ul><li>The client/caregiver can define pressure ulcer.</li><li>A. It is an area of skin where a lack of blood flow has caused tissue destruction.</li><li>B. It is caused by pressure, friction, or shearing (a combination of pressure and</li></ul>	NRS DATE INITIAL	C. Stage III  1. Full-thickness s  2. Involves epider subcutaneous ti  D. Stage IV  1. Deep-tissue des
II.	friction) force on the skin.  The client/caregiver has a basic understanding of the anatomy and physiology of the skin.	V	2. Fascia, muscle,
	<ul> <li>A. The outer skin, the epidermis, is made up of layered cells. It contains the pigment that makes up our skin color.</li> <li>B. The next layer is the dermis, which contains the oil and sweat glands, hair follicles, blood vessels, and nerves.</li> <li>C. Below the dermis is the subcutaneous layer, which contains fat cells and connective tissue to act as a shock absorber and insulator for the body.</li> </ul>		A. Eliminate or decreskin breakdown.  1. Use pressure-reof mattresses are rented or purch  2. Keep linens clewrinkles and crown and crown and crown are seen and crown and crown are seen and crown and crown are seen are seen and crown are seen and crown are seen are seen and crown are seen are seen and crown are seen are
III.	The client/caregiver can list factors that may increase risk of pressure ulcer.  A. Impaired circulation and sensation B. Immobility C. Incontinence of feces or urine D. Malnutrition E. Skin pressure, friction, and shearing F. Edema G. Certain medical conditions, such as		

- skin break
- mis, dermis, and issue
- struction
- and bone involved
- can list measures to as and to promote
  - ase the force causing the
    - elief devices (many types nd chair cushions can be nased).
    - an, dry, and free of rumbs.
    - h a draw sheet to g action.
    - e-reddened areas.
    - lbows, back of head, am, and coccyx by using
    - cohol (because of drying
    - change and cleanse ourage the use of a
  - s of wound.
    - 1. Cleanse hands and put on gloves.
    - 2. Wash wound carefully and pat dry.
    - 3. Cover wound with dressing as ordered.
    - 4. Debride wound if necessary.
    - 5. Avoid using tape directly on the
  - C. Promote circulation and nutrition.
    - 1. Eat a high-calorie, high-protein diet and smaller, more frequent meals. Use supplemental nutritional feedings.
    - 2. Take vitamin and mineral supplements including multivitamins, vitamin C, and zinc.

(Continued)

diabetes, dementia, and peripheral

The client/caregiver can recognize signs of

2. Loss of skin involving epidermis and

vascular disease

a pressure ulcer.

A. Stage I

B. Stage II

H. Overweight or underweight

1. Redness and warmth

2. No break in skin

1. Partial thickness

often into dermis

NRS DATE INITIAL

- 3. Exercise to increase circulation and bring nutrients to the wound.
- 4. Avoid alcohol and cold temperatures, which constrict blood vessels.
- D. Provide a controlled moist environment.
  - 1. Lubricate dry skin.
  - 2. Use ointments to protect skin from excessive moisture and incontinence.
  - 3. Use skin-care products as recommended (i.e., hydrocolloid dressings and Tegaderm).
  - 4. Deep wounds require packing to absorb drainage.
- E. Activity
  - 1. Change position every 2 to 3 hours while in bed or chair.
  - 2. Increase activity as tolerated.
  - 3. Teach safe transfer methods.
  - 4. Teach active and passive range of motion.
- F. Stress the importance of frequent checks of pressure points (sacrum, hips, heels, elbows, ears, and thoracic spine).
- VI. The client/caregiver can list possible complications.
  - A. Infection
  - B. Septicemia

## **RESOURCES**

Durable medical equipment companies for pressure-relief devices

Nurse wound therapist consult

Occupational or physical therapist consult

Dietician consult

Home health aid

## **REFERENCES**

Ackley, B. J., & Ladwig, G. B. (2006). *Nursing diagnosis handbook: A guide to planning care.* St. Louis: Mosby Inc.

Canobbio, M. M. (2006). *Mosby's handbook of patient teaching*. St. Louis: Mosby Inc.

Cohen, B. J., & Taylor, J. J. (2005). *Memmler's the human body in health and disease* (10th ed.). Philadelphia: Lippincott Williams & Wilkins.

Lutz, C., & Przytulski, K. (2001). *Nutrition and diet therapy*. Philadelphia: F. A. Davis Company.

Perry, A., & Potter, P. (2006). *Clinical nursing skills & technique*. St. Louis: Mosby Inc.

Timby, B. K., & Smith, N. C. (2003). *Introductory medical-surgical nursing* (8th ed.). Philadelphia: J. B. Lippincott Williams & Wilkins.