

Research - R166

Poster

Abstract Title:

No Pressure: Preventing pressure ulcers in the trauma bay

Authors:

Andres Viles MSN, RN, CCNS, CENCelestine Dent Park DNP, FNP-BCTamicka Jones BSN, RN

Background & Purpose:

Pressure ulcers are associated with significant morbidity and mortality, and are responsible for over \$11 billion in healthcare expenditures annually. Trauma patients are at heightened risk for pressure ulcers due to prolonged immobilization on a rigid spine board, long transport times, and transfer to firm surfaces for emergent treatment. We sought to describe a novel pressure ulcer prevention strategy for Emergency Department trauma patients admitted to the trauma ICU.

Study/Project Design:

Prospective observational study

Setting:

A 908- bed urban academic medical center with 73,000 annual ED visits and ACS-COT Level 1 trauma certification.

Sample:

All trauma patients admitted to the trauma intensive care unit from the emergency department between August 14, 2011 and November 15, 2011.

Procedures:

§ We implemented a pressure ulcer prevention program on all major trauma patients. During acute trauma resuscitation and assessment, ED nursing staff applied a Mepilex silicone foam dressing to the sacrum. The major outcomes were no pressure ulcer development, determined through daily evaluation of the patient by the research team and wound care nursing staff. Patients were reassessed on arrival to the ICU, when turned, bathed, and at shift change. Assessment findings were documented in the electronic medical record and reviewed daily. We analyzed the data using descriptive statistics.

Findings/Results:

Between August 14, 2011 and November 15, 2011, eighty-one (81) patients were included in the study, of which 56 (69.1%) received a sacral border dressing and 25 (30.9%) did not. Pressure ulcer development was higher in no-dressing than dressing patients (36% vs 1.8%; p<0.001). The overall pressure ulcer rate in the trauma ICU improved by 7.4% during the study period.

Discussion/Conclusions/Implications:

In this series of major trauma patients, sacral dressing use was associated with lower rates of sacral pressure ulcer development.