How UMC Addressed the Marked Increase of Pressure Injuries from Proning Patients with COVID-19

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BACKGROUND

In late March 2020 The Wound, Ostomy, and Continence Nurse (WOCN) Team identified a significant increase of Pressure Injuries (PI) reported in the safety intelligence (SI) reporting system for patients with Covid-19, specifically with those patients in the prone position. After reviewing these findings a multidisciplinary team was established. The team evaluated the SI data, identified the body area, cause of the PI and determine changes to implement and educated staff to help prevent further injuries.

PURPOSE

The Purpose of the quality improvement project was to evaluate SI reports submitted for pressure injuries, look at current evidence-based practice and implement changes to improve outcomes. The Multidisciplinary team consists of staff nurses, managers, respiratory staff, Quality Improvement (QI) staff and the WOCN. The goal of this QI project is to decrease PIs related to patients with Covid-19 when being placed in the prone position.

METHODS

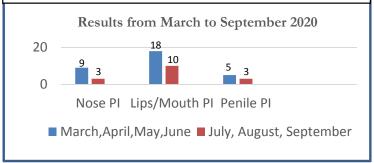
The team met on April 1, 2020 to discuss interventions to decrease PIs related to proning patients with Covid-19.

Nasal PI injuries, Consensus from healthcare

Nasal P1 injuries, Consensus from healthcare professionals(HCPs), including Physicians, was that Nasogastric tubes would only be used as a last resource. The implementation of orogastric tubes would be used for any patient in the prone position.

Lips/mouth mucosal wounds, Consensus from HCPs, including Physicians, nurses and respiratory therapy(RT) was to change from the present ETT holder to a holder without any hard devices. When tracheostomy tube ties were utilized, a foam dressing was placed at the corner of the mouth. For skin breakdown due to moisture, a long acting purple skin protector was applied which helped notify the team when it was time to re-apply.

Penile wounds: Consensus from HCPs, including Physicians, Nurses, was to use bolster/padding around the pelvic area, utilized a wicking fabric in the groin area and under the penis to wick away moisture and prevent skin irritation.



RESULTS

Results from March 2020 to September 2020 showed a decrease in all three areas after implementation of new interventions. Continued monitoring of interventions and the data will be ongoing by the WOCN.

CONCLUSIONS

Pressure Injuries decreased by 25% and mucosal injuries by 25%

REFERENCES

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