12.0 Summary of pressure ulcer preventative strategies.

- **Maintain and improve tissue tolerance to pressure**
  - **Skin assessment**
    - Daily skin inspection for signs of impaired skin integrity
    - Skin checks with each turn
    - Avoid irritating substances
  - **Skin hygiene**
    - Treat dry flaky skin with topical moisturiser
    - Avoid sustained contact with body fluids
    - Actively promote continence
    - Avoid skin contact with plastic surfaces
  - **Maintenance of stable skin temperature**
    - Remove warming blankets once hypothermia is corrected
    - At least 2 hourly turning schedules on a basic hospital mattress
  - **Optimise nutritional status**
    - Maintain balanced diet
    - Refer to dietitian

- **Individual is identified 'at risk' of developing pressure ulcers**

- **Turning schedule**
  - According to skin's tolerance to pressure
  - Avoid direct contact between bony prominences
  - Avoid uninterrupted sitting in chair
  - Proper lifting techniques
  - Protect exposed skin
  - Elevate foot of bed 20 degrees
  - Lower head of bed
  - Elevate heels
  - Consider heel protectors

- **Reduce heel pressure**
  - Mobilise where appropriate
  - Refer to physiotherapist and/or occupational therapist
  - Constant low pressure device
  - Alternating pressure device
  - Identified risk factors
  - Pressure ulcers

- **Protect against forces of pressure friction and shear**
  - Use appropriate support surfaces
  - Overlays
  - Replacement mattresses
  - Specialty beds

- **Promote activity and mobility**
  - Overlays
  - Replacement mattresses

- **Documentation and communication**
  - Prevention strategy
  - Response to interventions

*Image Courtesy of AWMA*