

Pressure Ulcer Prevention

If your patient has:

Foley Tubing	<ul style="list-style-type: none"> ✓ Position tubing in between legs, down the middle, around the heel and off the bottom end of the bed.
Leg Compression Tubing (Covidien Pumps)	<ul style="list-style-type: none"> ✓ Position tubing in between the legs and around the heel ✓ <u>Be sure to document whenever SCDs are placed or removed on your patient in OneChart!</u>
Oxygen Tubing	<ul style="list-style-type: none"> ✓ Place foam protectors on O2 tubing behind the ears and on the cheeks
Oxygen Finger Probe	<ul style="list-style-type: none"> ✓ Rotate probe every 4 hours and document
Reusable Oxygen Ear Probe	<ul style="list-style-type: none"> ✓ Rotate probe every 2 hours or more often PRN and document

When appropriate for your patient (discuss with your nurse):

- Float heels
 - ✓ Placement of pillow under heels so heels are “floating”
 - ✓ Make sure feet are NOT touching foot board and inform RN of need for bed extender if feet are touching foot board.
- Float elbows
 - ✓ Placement of pillows under each arm
- Reposition per your nurse’s directions (frequency, i.e. every 2-3 hours)
 - ✓ Placement of pillows under bony prominences i.e. sacrum, coccyx, hip, between knees, between ankles
 - ✓ Lift patient utilizing draw sheet to reposition. DO NOT drag. Dragging can cause shearing of the skin.

If your patient has a pressure ulcer, please discuss appropriateness of pillows and positioning with your nurse (i.e. do not position patient on side with pressure ulcer)

- Incontinence Care
 - ✓ Utilize ONE underpad for incontinent patients. More than one pad can decrease airflow and cause accumulation of moisture on skin.
 - ✓ DO NOT utilize adult briefs while patient is in bed. Utilize only when patient is ambulatory. i.e. walking in halls with physical therapy and occupational therapy