

Pressure Injury Prevention

What is a pressure injury?

- When blood and oxygen supply to a part of the body is cut off for a length of time due to pressure applied to the area, the skin and tissue can become injured or die.
- This prolonged pressure to an area often happens when a child is unable to move on their own to shift their body weight.
- Pressure injuries often occur over bony parts of the body such as:
 - Butt bone/lower back
 - o Heels
 - Ankles
 - o Elbows
 - o Back of the head
 - o Ears
 - Hips
 - o Knees
 - o Shins
 - Shoulders/shoulder blades
- A pressure injury can also happen due to pressure from a medical device such as:
 - o Feeding tube/button
 - o Splints
 - o Trach tube/ties
 - o Pulse ox probe

What does a pressure injury look like?

- A pressure injury can show up in some different ways:
 - o Redness that does not go away after 30 minutes of relieved pressure.
 - o A new blister, open sore, or wound.
 - o Change in temperature or color of an area.
 - o A boggy or spongy feeling of the area.

How can my child get a pressure injury?

- Common risk factors for pressure injuries include:
 - o Limited movement while in bed or in a chair
 - o Incontinence (inability to control bowel or bladder)
 - Poor nutrition and fluid intake
 - o Skin rubbing or dragging on other surfaces with position changes and transfers

How can I prevent my child from getting a pressure injury?

• Changing body position often

- o If able to move themselves, your child should be told to change positions often when in bed or in their chair.
- o If unable to change positions on their own:
 - Turn your child every two hours when awake in the positions below.
 - Turn your child every four hours when asleep in the positions below.
 - Turn to lie on left side.
 - Turn to lie on right side.
 - Turn so child is lying on their back.
- o Tilt or change pressure every 30 minutes when up in a chair.
- Keep the head of the bed as low as possible to prevent your child from sliding down the bed.
- Float your child's heels by putting a pillow under their lower legs (under ankles to knees).
- Cushion bony parts of the body with pillows or rolled towel or blankets, or stuffed animals.
- Use the waffle mattress that is sent home with your child. This mattress helps to decrease pressure when your child is in their bed.
- Use a chair cushion when your child is in their chair.
- Make sure your child is being lifted off surfaces during transfers and repositioning. Sliding along the surfaces can cause friction or shear injuries. This can also weaken the skin and place your child at greater risk for a pressure injury.

• Skin care

- o Wash your child's skin with warm water and gentle soap.
- Keep your child's skin well hydrated with creams or petroleum-jelly based products, especially after cleaning the skin.
- Look at your child's skin every day for any signs of redness, breakdown, or new wounds. Tell your child's doctor about any changes that do no get better within 30 minutes of changing their position.

- o Avoid massaging your child's skin over bony areas.
- Cleanse your child's skin of any leakage of stool or urine. Use briefs or under pads that pull the moisture away from your child's skin.
- o If not already part of your child's plan of care, talk to their doctor about the use of a protective barrier cream to protect the skin from stool and urine moisture.

Nutrition

- o If your child eats and drinks by mouth, try your best to give your child healthy foods such as lean meats, vegetables, fruits, and whole grains.
- o Make sure your child is drinking enough water all day long.
- o Give your child nutrition supplements as ordered by their doctor.
- If your child gets food through a feeding tube, give the type and amount of formula and water that is ordered.

• Also:

- Avoid drastic temperature changes on your child's skin, especially in areas where they may not have as much feeling.
- Your child should not smoke or drink alcohol. These can decrease blood flow to the skin and increase your child's risk of getting a pressure injury.

When should I call my child's doctor?

- You should call your child's doctor if you notice changes in your child's skin such as:
 - o Redness that does not go away after 30 minutes of relieved pressure.
 - o A new blister, open sore, or wound.
 - o Change in temperature or color of an area.
 - o A boggy (spongy) feeling of an area of skin.