



Government of **Western Australia**
Department of **Health**

Minimising Pressure Injury Incidence In Vascular Surgery Patients

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Declaration of Financial Interests or Relationships

I have no financial interest or relationship(s) to disclose



Background

- Pressure Injuries often result in:
 - Decreased quality of life
 - Increased length of stay
 - Readmission to hospital
 - Limb loss





Background

- Established pressure injury risk assessment tools have a poor inter-rater reliability.
- Recent research in Western Australia has found:
 - That nursing PI risk assessment does not adequately assess PI risk in the High Risk Foot.
 - That nursing understanding of the factors leading to pressure injuries is not uniform.



Aims/Outcomes

- Identify which patients admitted to hospital by Vascular Surgeons are at increased risk of pressure injury.
- Decrease pressure injury incidence in patients admitted under the vascular surgical team.



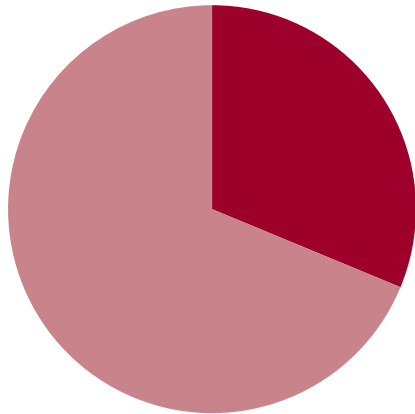
Method

- Retrospective audit of patients who developed pressure injuries over 12 month period
 - Demographics
 - Co-morbidities
 - Surgical time
 - Length of stay
- Develop changes to patient management
- Re-audit at 12 month intervals post intervention

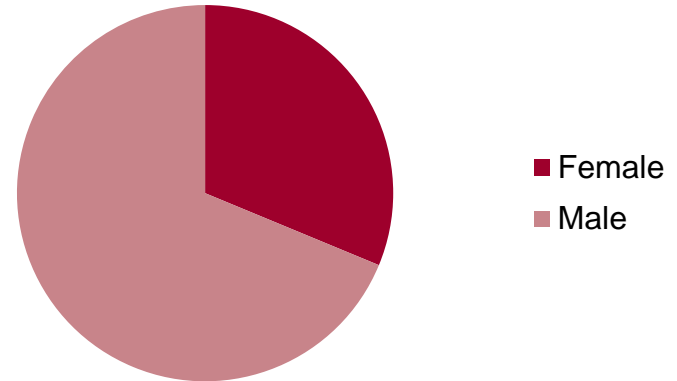
Retrospective Audit Results: Demographics



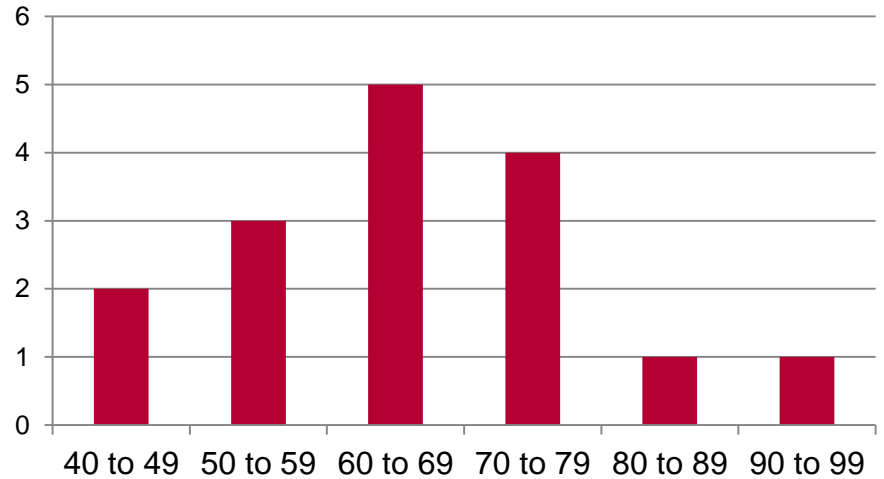
Admission Type



Gender



Age Distribution



n=16



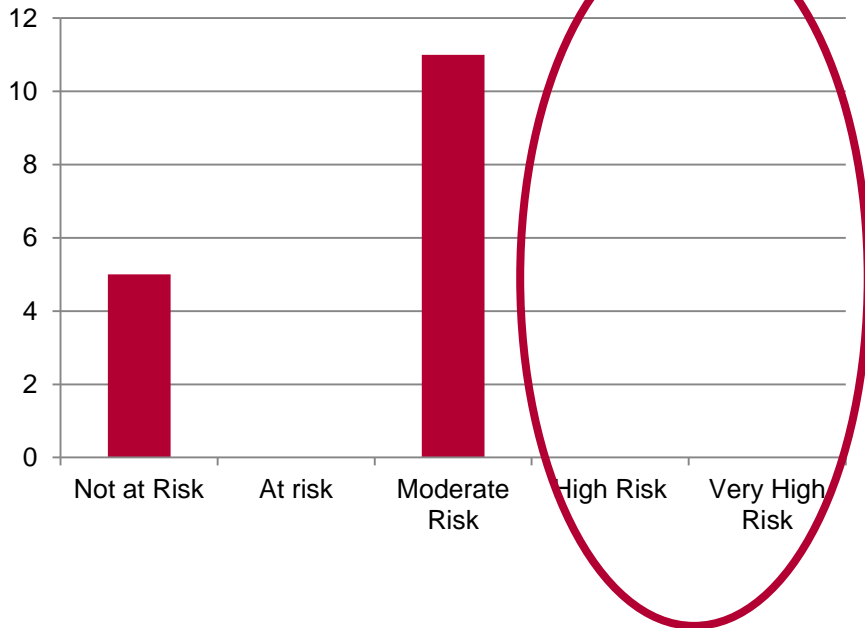
Retrospective Audit Results

- Poor documentation of intervention or patient non-compliance
- Patient weight, length of stay and surgical time did not appear to be relevant in this small sample

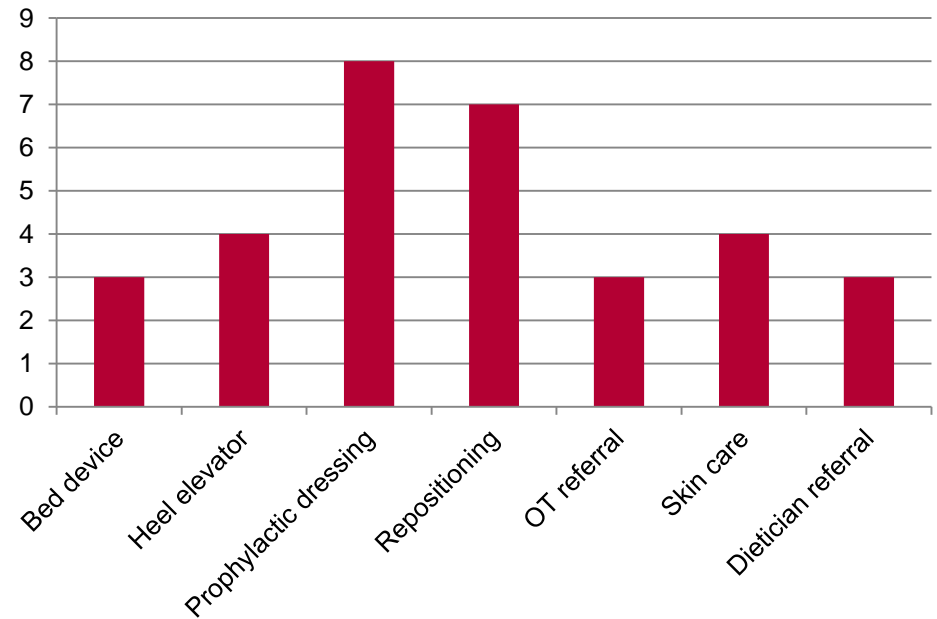


Retrospective Audit Results: Pressure Injury Risk Assessment – How did we do?

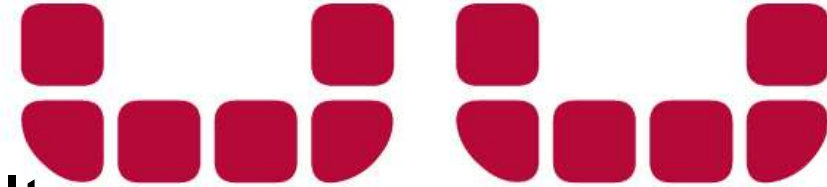
Pressure Injury Risk on Admission



Interventions Documented Prior to Pressure Injury

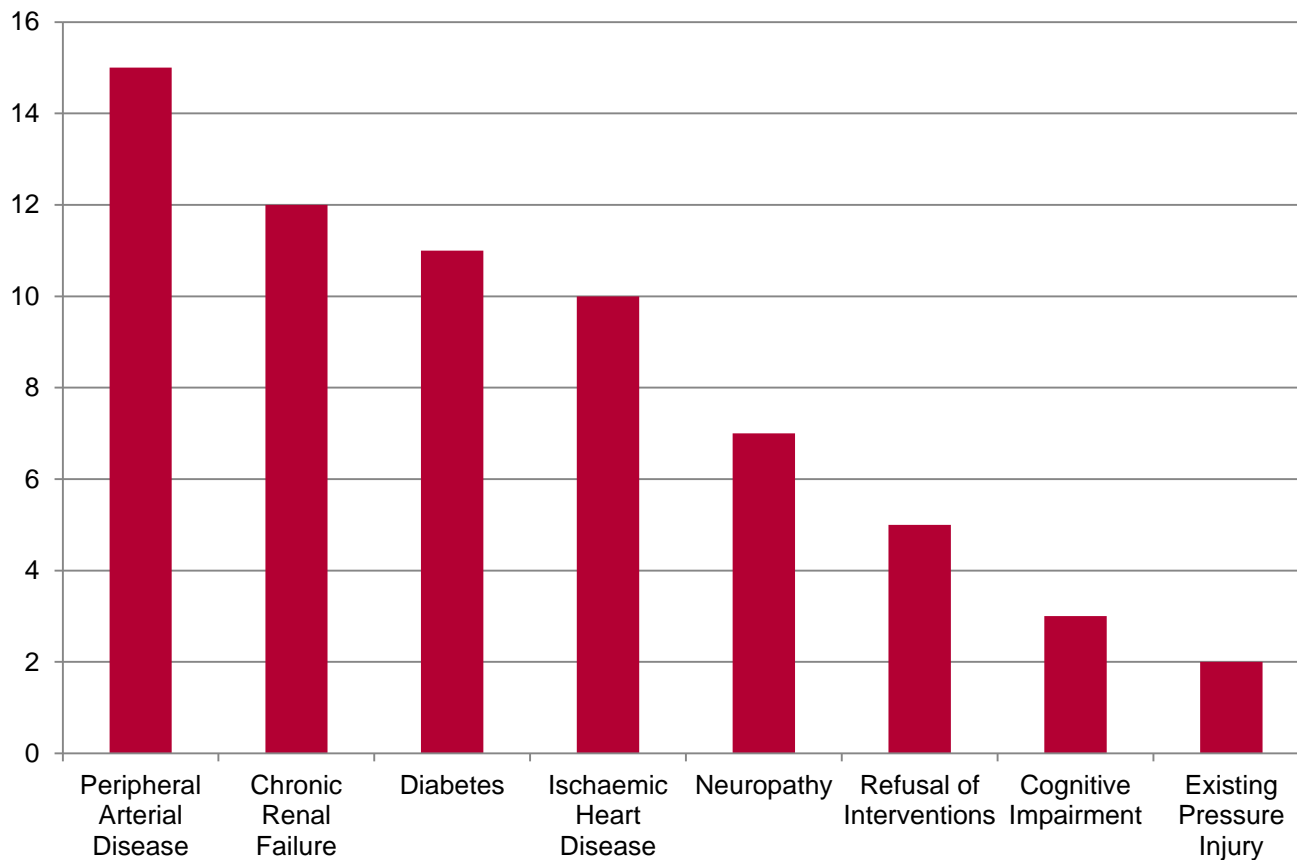


n=16



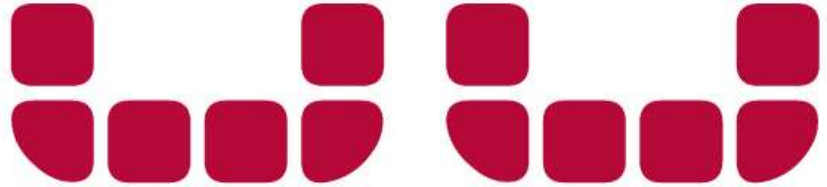
Retrospective Audit Results

Co-morbidities



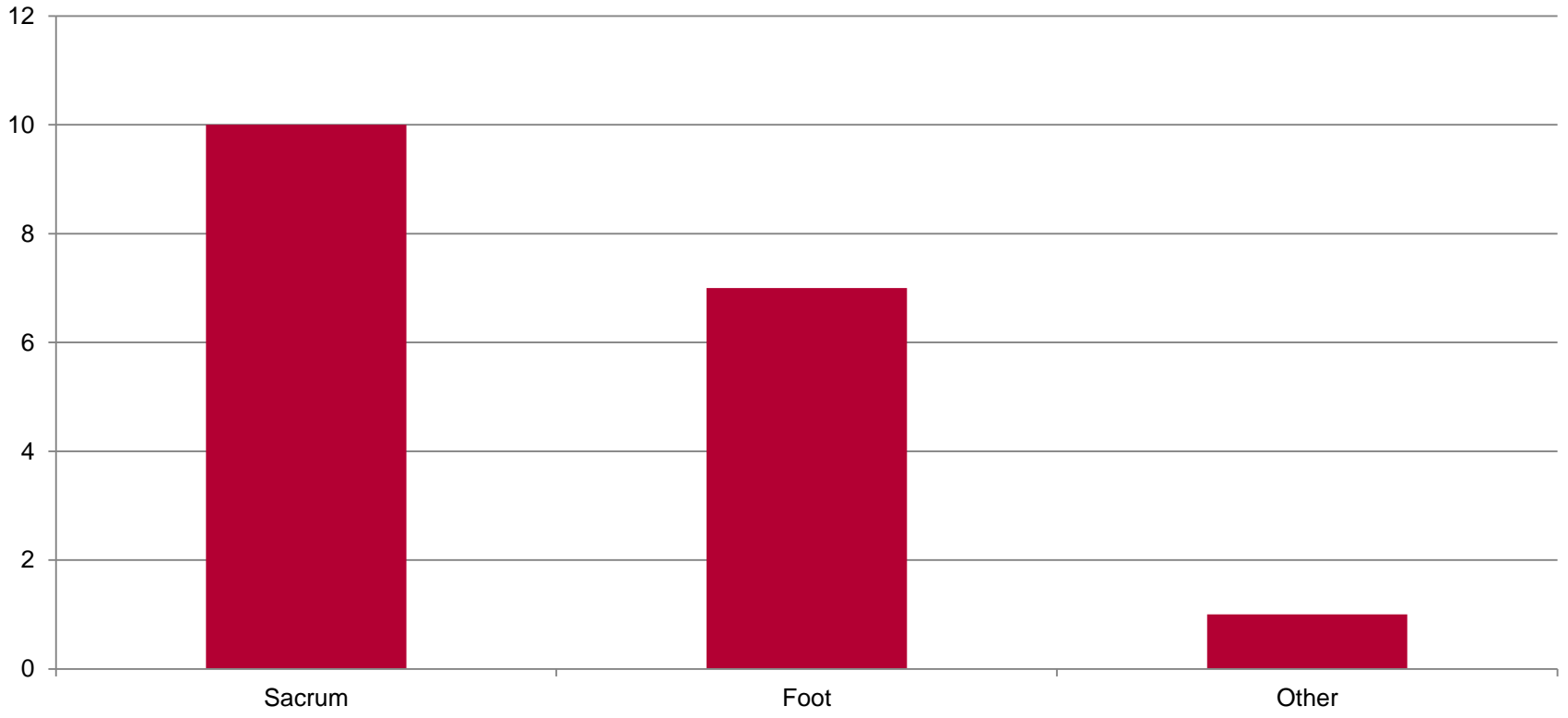
- 9 patients had PAD, CRF and Diabetes
- 4 patients had 2 out of 3

n=16



Retrospective Audit Results

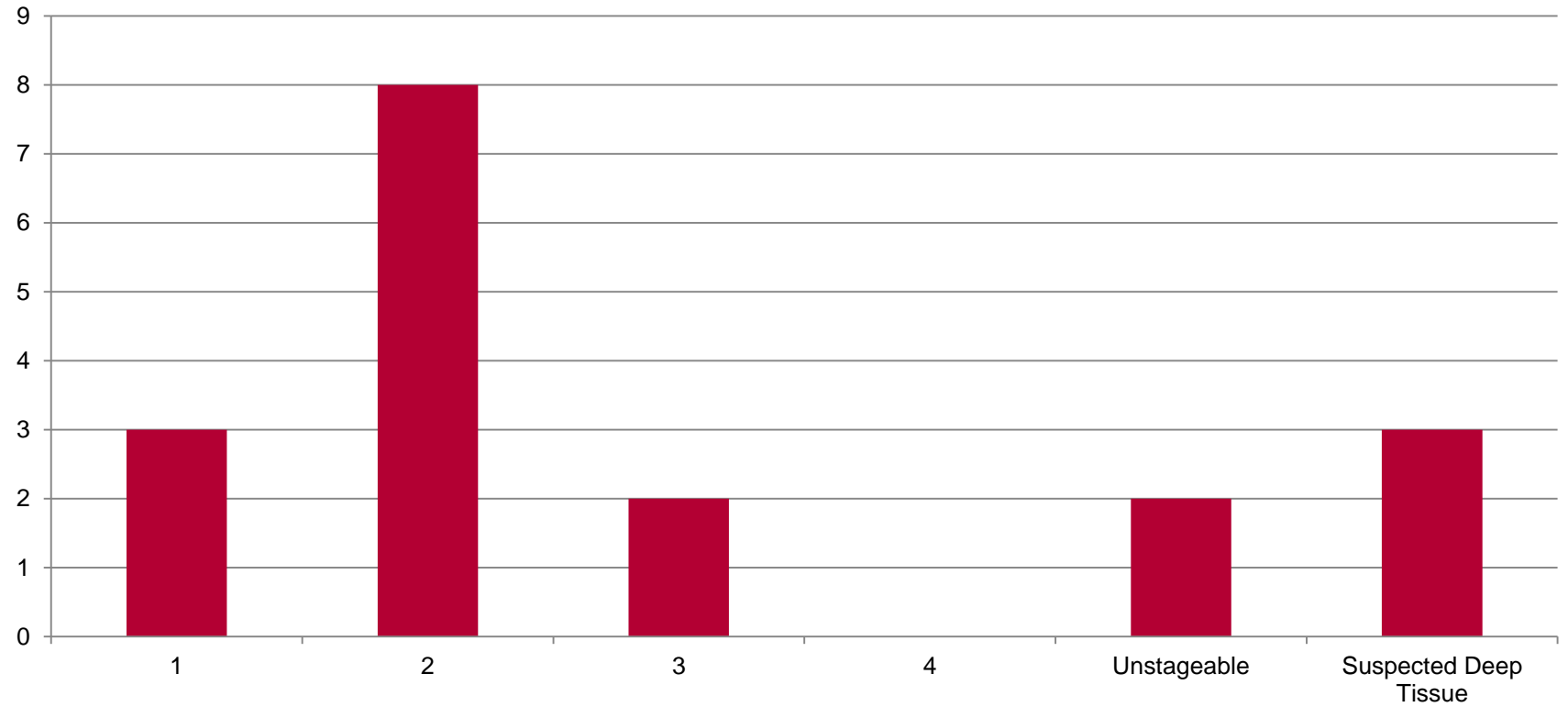
Location of Pressure Injury

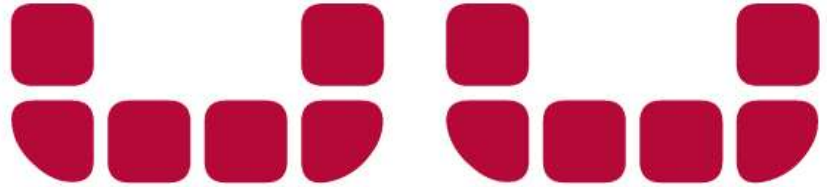




Retrospective Audit Results

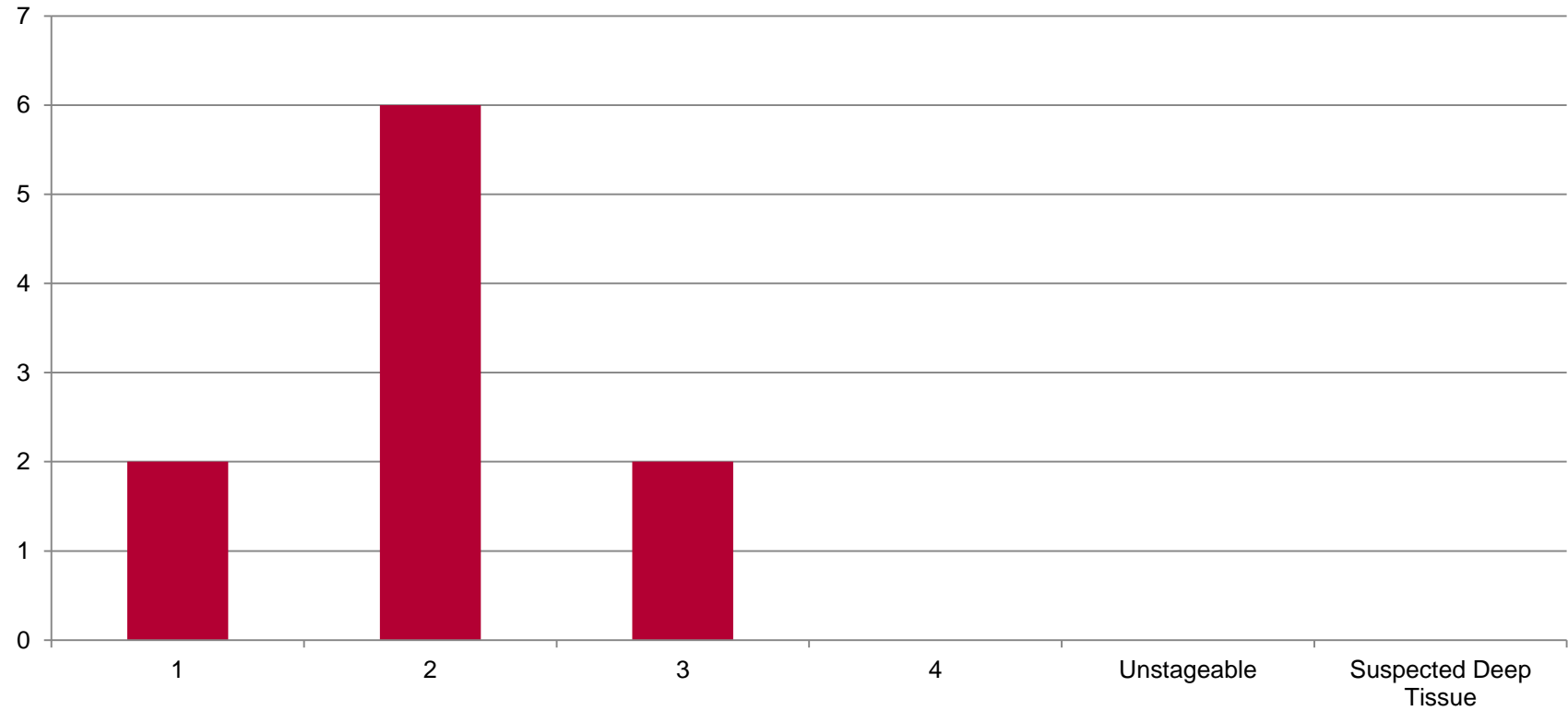
Stage of Pressure Injury



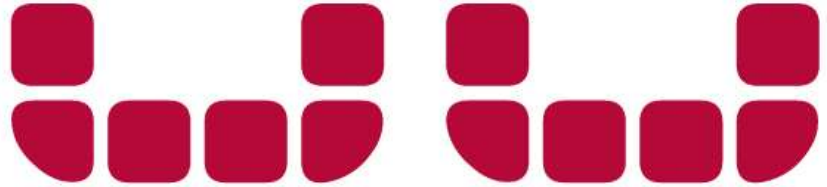


Retrospective Audit Results

Stage of Pressure Injury - Sacrum

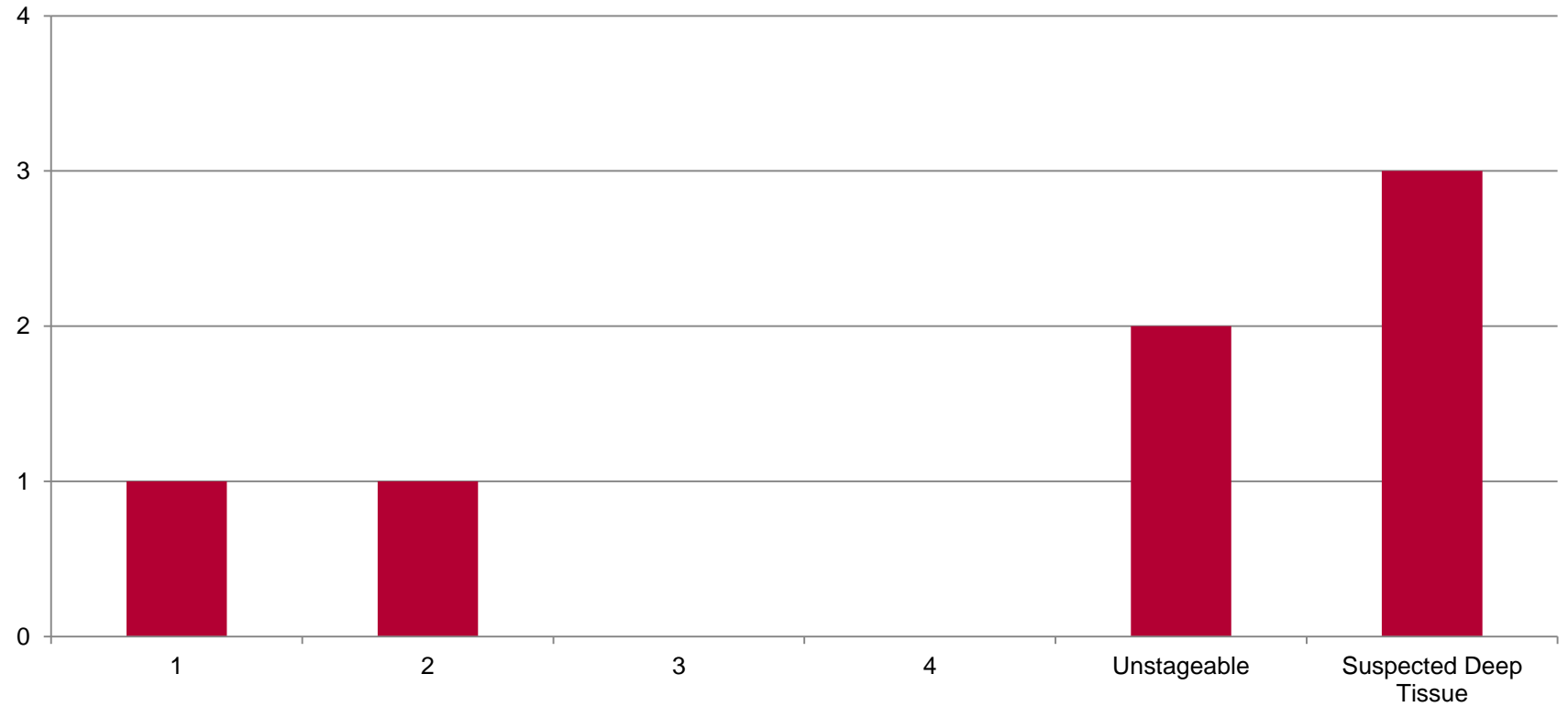


n=10

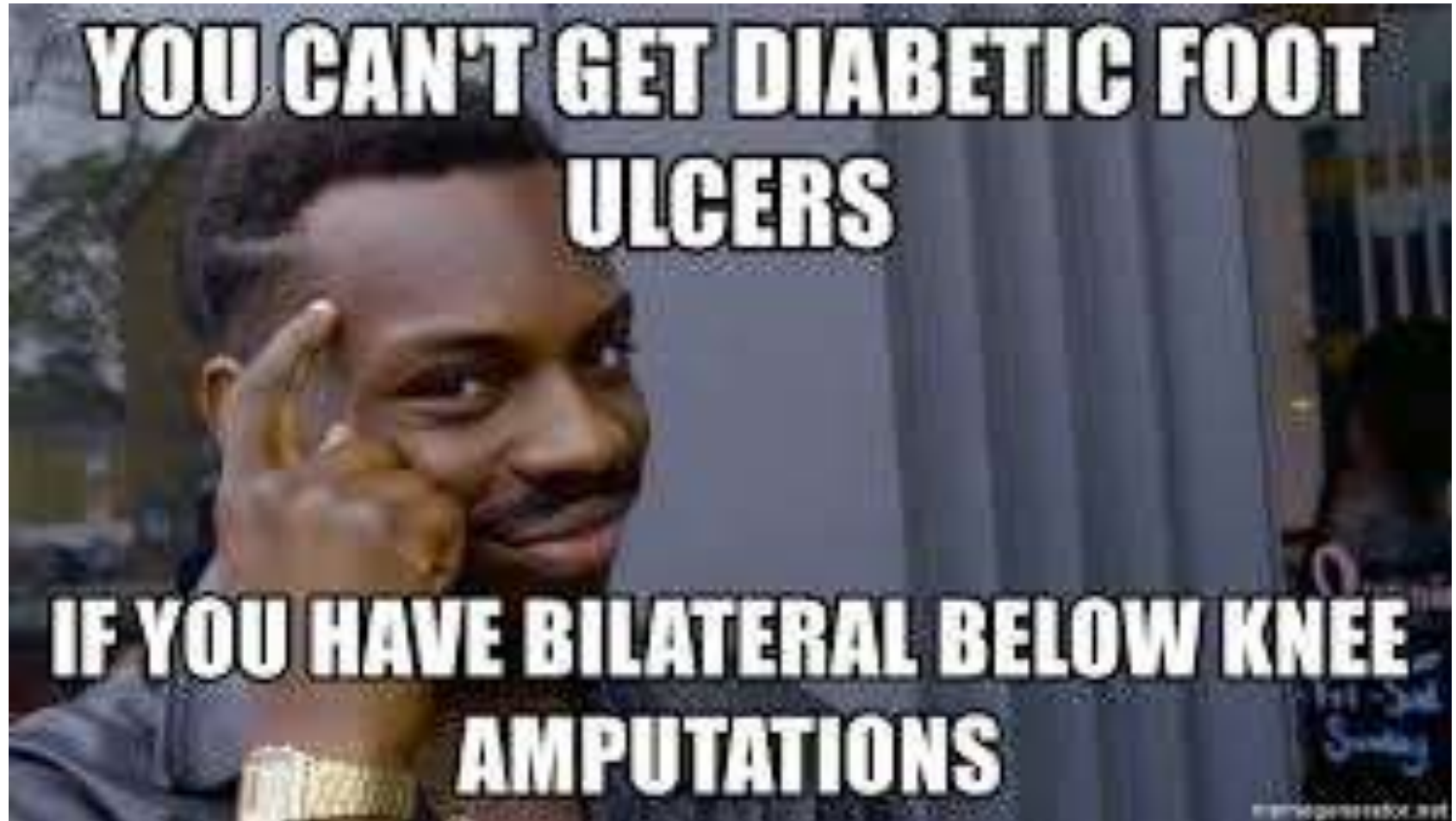


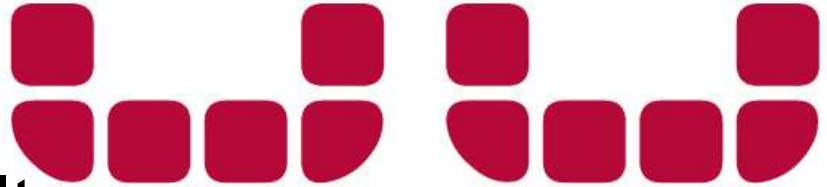
Retrospective Audit Results

Stage of Pressure Injury - Foot



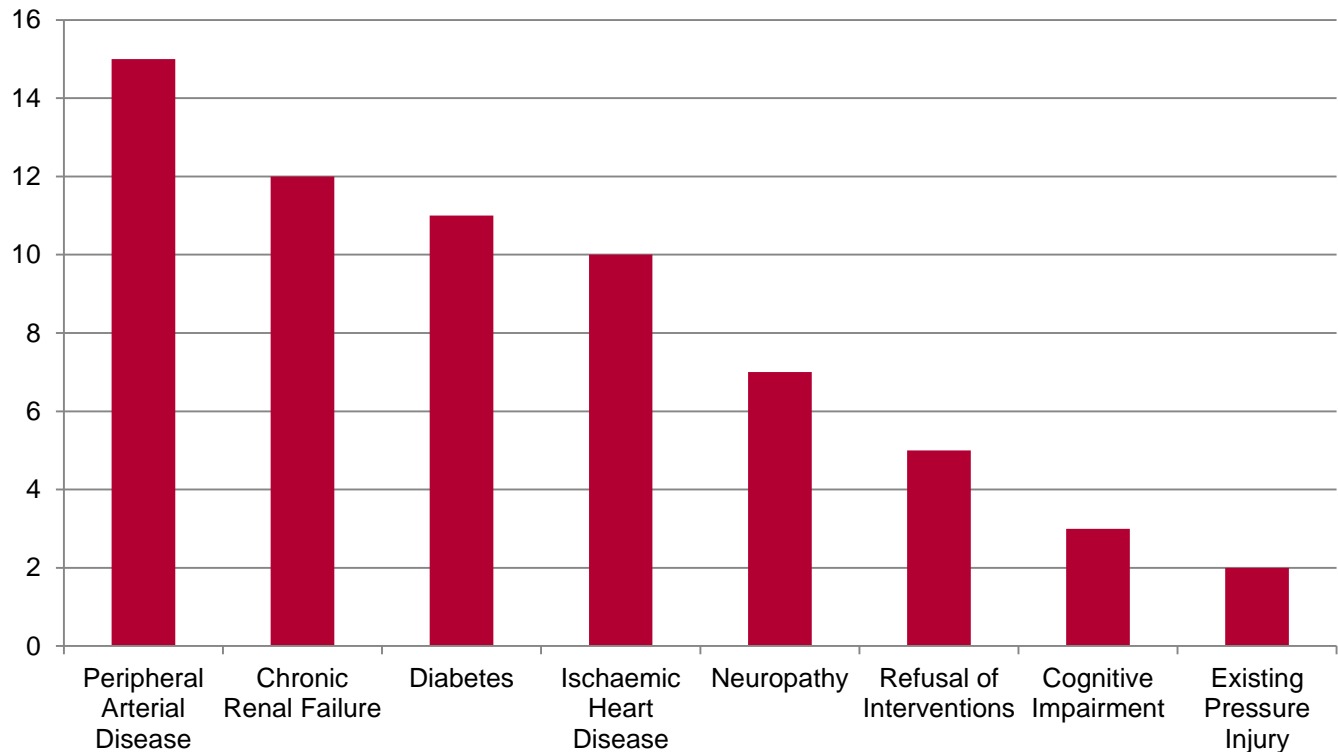
n=7





Retrospective Audit Results

Co-morbidities



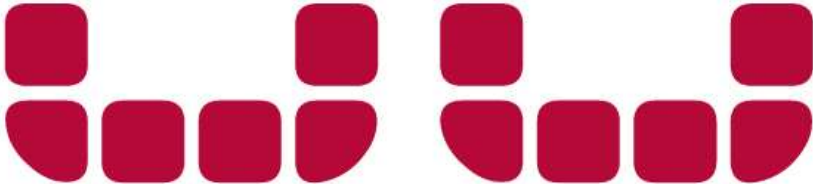
- 9 patients had PAD, CRF and Diabetes
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n=16

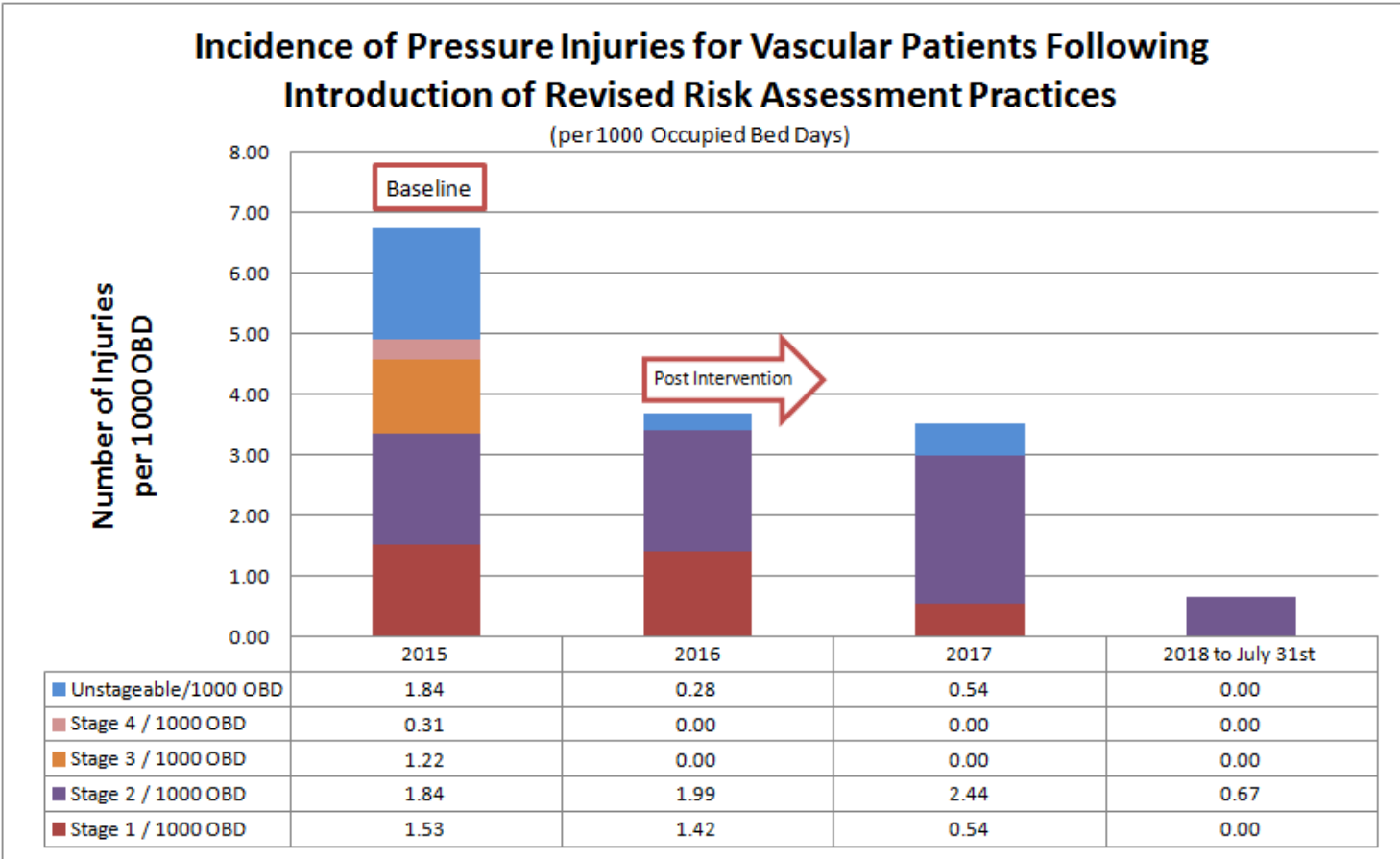


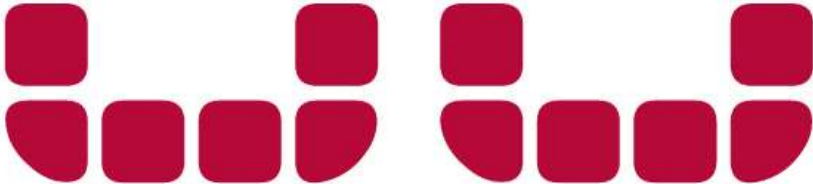
Interventions

- Patients with PVD, CKD and/or Diabetes were managed as high risk of pressure injuries. This included utilising:
 - Prophylactic dressings to heels and sacrum
 - Offloading devices such as cushions
 - Offloading mattress
- Education to improve documentation of interventions as well as patient non-compliance



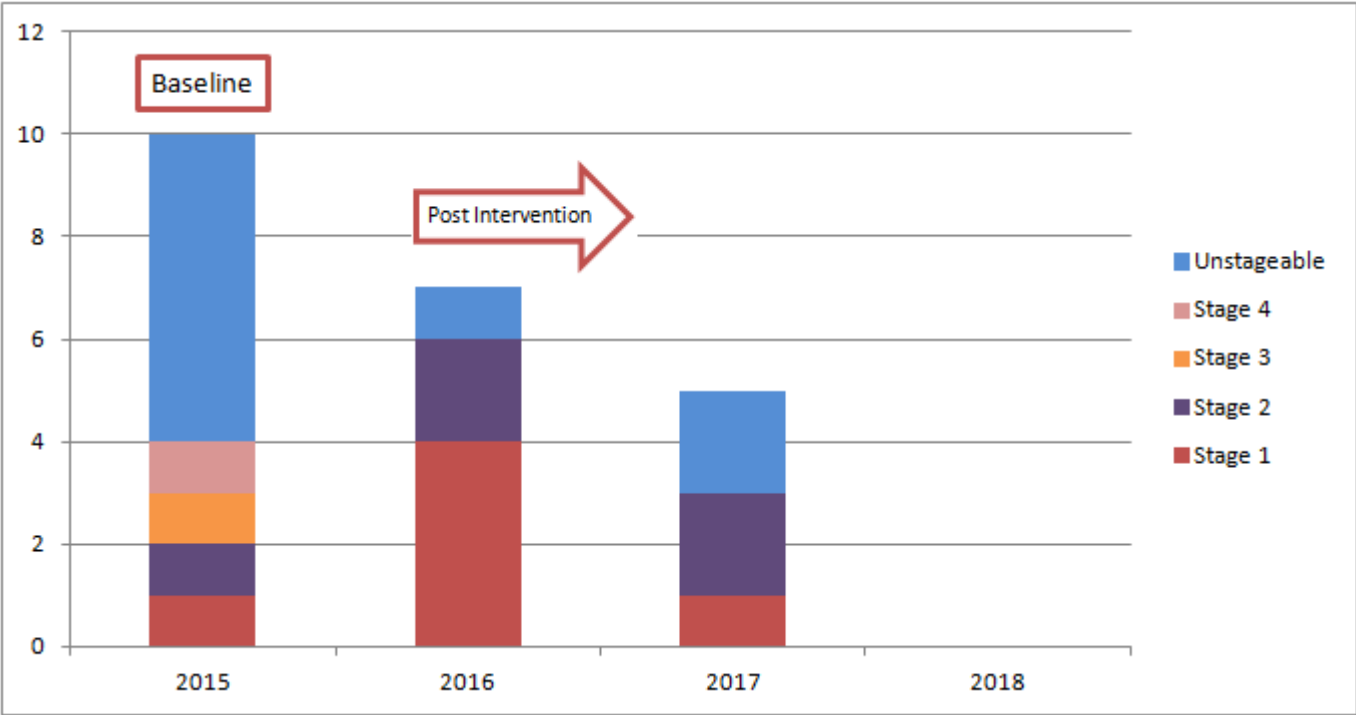
Results





Results – Foot Injuries

Incidence of Foot/Heel Pressure Injuries for Vascular Patients





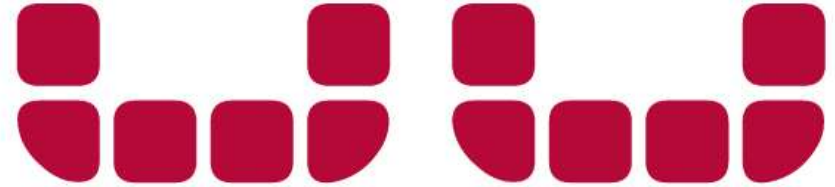
Summary

- Incidence of pressure injuries decreased over intervention period
- There were ZERO foot pressure injuries in the last audit period.



Further interventions

- Integration of the Waterlow Score across the hospital site as this grades diabetes, chronic diseases and peripheral vascular disease as increasing majority of vascular surgery patient risks.
- Further research is required to improve methods for assessing pressure injury risk.



Acknowledgements

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Adj Clin Prof, Faculty of Health and Medical Sciences, University of Western Australia, WA

Miss Kathryn Jafferries BNurs, GradCertHlthEd

Registered Nurse, G62, Sir Charles Gairdner Hospital, Perth WA





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