

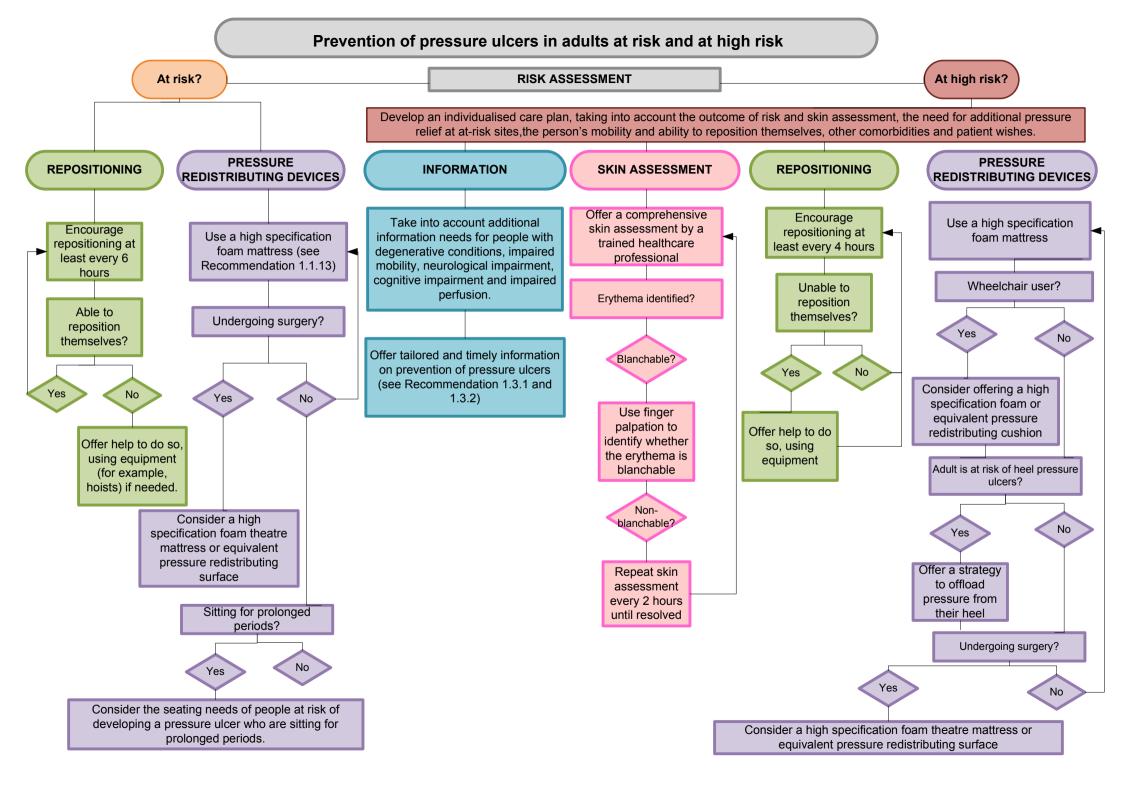
Putting NICE guidance into practice

Algorithm for risk assessment, prevention and management in adults

Implementing the NICE guideline on Pressure ulcers (CG179)

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Identifying who is at high risk (neonates, infants, children, young people and adults) Be aware that all patients are potentially at risk of developing a pressure ulcer. Patient admitted to Receiving NHS care in primary or secondary care, care home community care and emergency Reassess departments? or tertiary care? pressure ulcer risk Yes Yes For definitions of 'at risk' and at 'high risk' Does the indvidual Change in please see full guideline No have a risk factor? clinical status? Yes Carry out and Carry out and document a risk document a risk assessment assessment Neonate, infant, child or Adult? Yes Yes young person? Consider using a validated scale for risk assessment to support clinical Use a scale validated for this population (for example, the judgement (for example, the Braden scale, the Waterlow score or the Braden Q scale for children) to support clinical judgement. Norton risk assessment scale) Adult at high risk of pressure ulcer following Neonate, infant, child or risk assessment? young person at high risk Yes No following risk assessment? No Yes See NEONATES, INFANTS, See NEONATES, INFANTS, CHILDREN AND YOUNG PEOPLE **CHILDREN AND YOUNG PEOPLE** See ADULTS AT RISK See ADULTS AT HIGH RISK **AT HIGH RISK AT RISK**



Management of pressure ulcers in adults Categorise each pressure ulcer using a validated classification tool. Use this to guide ongoing preventative strategies and management Document the results of categorisation each time the ulcer is assessed. **PRESSURE NUTRITION AND ULCER MEASUREMENT** DEBRIDEMENT **DRESSINGS ANTIMICROBIALS** REDISTRIBUTING DEVICES **HYDRATION** Offer a nutritional Are there: Assess the need to debride a Record and document Discuss what type of dressing Use a high assessment by a -clinical evidence of pressure ulcer in adults. the surface area of all should be used, taking into specification dietitan or other systemic sepsis taking into consideration: account pain and tolerance, pressure ulcers. If foam mattress healthcare - the presence of dead - spreading cellulitis position of the ulcer, amount of possible, use a professional tissue, patient tolerance, any - underlying validated measurement exudate, frequency of dressing osteromyelitis comorbidities, the grade, size change and patient choice. technique. and extent of the pressure **Nutritional** Insufficient to deficiency ulcer. redistribute identified? pressure? Consider using a dressing Yes No Allow autolytic that promotes a warm, moist Document an estimate of debridement wound healing environment the depth of the ulcer and using an for grades 2, 3 and 4 Discuss with the No Consider using the presence of appropriate pressure ulcers. microbiology a dynamic undermining. dressing department support surface which antibiotic to offer Do not routinely offer Offer nutritional ikely to take a nutritional supplements to long time? supplements unless Sitting for a correct nutrition Antibiotics supplements are prolonged period? deficiency Offer not needed to support antibiotics indicated healing Consider using sharp Provide information Consider debridement. and advice on how seating needs. to follow a balanced diet to maintain an adequate nutritional Consider a high status, taking into Sharp debridement specification account energy, contraindicated? foam or protein and equivalent micronutrient pressure requirements redistributing cushion. Consider larval therapy