

The Current Situation:

*Malnourished patients are **2 times** more likely to develop a pressure ulcer in the hospital.¹*



Collaborative Leadership

How can you and your care team reduce the incidence of pressure ulcers?

All clinicians can play an integral role in the screening process and prevention of pressure ulcers.

- Pressure ulcers can develop in as little as 2 hours.²
- Pressure ulcers can increase length of stay by 4.3 days.³

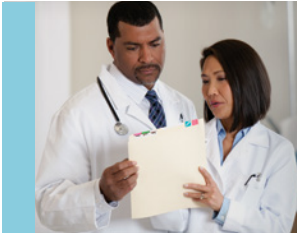


Nutrition Intervention

Rapid nutrition intervention is important to your patients' recovery.

Nutrition care, in addition to standard medical care, has been shown to reduce pressure ulcer incidence by 25%.⁴ Some specific evidence-based guidelines from the NPUAP and WOCN are:

- Offer high-protein mixed oral nutritional supplements, in addition to the usual diet, to individuals with nutritional risk due to acute and chronic disease, or following a surgical intervention.⁵ (Strength of Evidence A)
- Offer elderly patients recovering from acute illness 2 daily nutritional supplements to help avoid the development of pressure ulcers.⁶



Enhanced Procedures

How can you reduce your hospital's incidence of pressure ulcers?

- 1 Recognize and diagnose *all* patients at risk of malnutrition**
 - Identify patients at risk of developing pressure ulcers with facility-specific screening tools, like the Malnutrition Screening Tool.
- 2 Rapidly implement nutrition interventions and continue monitoring your patients**
 - Enhance pressure ulcer prevention policies by including early nutrition intervention.
 - Promote teamwork between nutrition services and nursing to educate patients on the benefits of nutrition as a part of their care.
- 3 Develop a discharge plan for patient nutrition care and education**
 - Empower all clinicians to provide nutrition education, outpatient instructions, and other resources for continued compliance with patients' nutrition care plan.

Visit malnutrition.com for more information on the simple steps to help reduce the incidence of pressure ulcers.

References: 1. Banks M, et al. *Nutrition*. 2010;26:896–901. 2. Lyder CH. *JAMA*. 2003;289:223-226. 3. Graves N, et al. *Infect Control Hosp Epidemiol*. 2005;26:293-297. 4. Stratton RJ, et al. *Ageing Res Rev*. 2005;4(3):422-450. 5. EPUAP (European Pressure Ulcer Advisory Panel)/NPUAP (National Pressure Ulcer Advisory Panel) Guideline for Prevention and Management of Pressure Ulcers, June 2010. 6. Wound, Ostomy, and Continence Nurses Society (WOCN). *Guideline for prevention and management of pressure ulcers*. Mount Laurel (NJ): Wound, Ostomy, and Continence Nurses Society (WOCN); 2010:24-26.