Evidence-Based Treatment Guidelines for Pressure Ulcers
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Problem: As of October 1, 2008 Medicare will no longer pay for hospital acquired pressure ulcers (HAPU) or progression of pre-existing pressure ulcers. This change in reimbursement has driven hospitals to implement strategies to combat HAPU, although pre-existing pressure ulcers deserves equal attention. The new policy is intended to create a safer hospital stay by using evidenced-based treatment guidelines.

Evidence: Implementation of an evidence based guideline for the treatment of pressure ulcers is imperative to improve healing and to prevent progression of pressure ulcers. Research indicates that proper management of pressure ulcers improves healing time and decreases overall cost.

Strategy: In evaluating the literature on current evidence-based treatment guidelines, two protocols were chosen based on their relevance in pressure ulcer treatments. The guidelines formulated through National Institute for Health and Clinical Excellence and Institute for Clinical Systems Improvement were used to develop an evidence based treatment guideline for pressure ulcers. A pre- and post-test questionnaire was used to evaluate the introduction of an evidence based treatment guideline for pressure ulcers in the Medical Intensive Care Unit. In order to determine the progression of pressure ulcers a weekly assessment was conducted by using the Pressure Ulcer Management Monitor Tool. Data was collected for 3 months.

Practice Change: Provide evidence that the use of a treatment guideline for pressure ulcers decreases the progression of pressure ulcers creating a safer hospital stay.

Evaluation: During a 3 month period 239 patients were evaluated for the presence of pressure ulcers on admission or hospital acquired pressure ulcers for participation in the study. Only 21 patients qualified for the study and were monitored on a weekly basis.

Results: In conclusion of the 3 month implementation of the evidence based treatment guideline for pressure ulcers, there was no identified progression of pressure ulcers in the Medical Intensive Care Unit. Improved healing of pressure ulcers was identified.

Recommendations: The use of an evidence based treatment guideline for pressure ulcers is a valuable tool to prevent the progression of pressure ulcers. The evidence based treatment guideline for pressure ulcers is awaiting approval for hospital-wide use as a policy and procedure.

Bibliography:
