

SKIN CARE: NO IFS, ANDS, OR BUTTS ABOUT IT

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Many health professionals are unaware that surgical patients face substantial risk of hospital-acquired pressure ulcers. According to the Agency for Healthcare Research and Quality, 23 to 66 percent of pressure ulcers stem from the operating room. Surgical patients face an increased risk of pressure ulcers because they often spend prolonged periods of time lying still on the operating table while their skin is exposed to pressure, shear, heat, friction, and moisture.

Patients that come to our facility for cardiac and thoracic surgical procedures are often at increased risk due to their co-morbidities and prolonged cardiac or vascular disease. In an ongoing effort to reduce the risk of pressure ulcers, our cardiothoracic preoperative department began applying Mepilex to all patients' sacrum prophylactically. While the cost of Mepilex can be high, the cost of treating a pressure ulcer ranges from \$2,000 to \$70,000 per wound, and will no longer be reimbursable through Medicare or Medicaid.

Preoperative nurses were given additional instruction on thorough assessment and documentation of skin condition to ensure any pre-existing skin issues were identified and treated before transferring into the operative suite. Hand off communication to each subsequent area (Induction/Holding room and operative suite) also includes discussion of patient skin condition and any accompanying treatments or preventative measures. Since program inception, sacral wounds that can be attributed to the perioperative area have steadily declined. Perianesthesia nurses can take active measures to impact patient care and, ultimately, the cost of that care.