

IMPROVING PATIENT OUTCOMES: PERIANESTHESIA SKIN ASSESSMENT, INTERVENTIONS & DOCUMENTATION

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Background: Pressure ulcers are extremely costly for hospitalized patients. Patients undergoing operative procedures are at increased risk to develop skin alterations including pressure ulcers. Identifying pre-existing skin alterations in preoperative patients and intervening to reduce risk for our perianesthesia patients can save money and reduce complications including prolonged lengths of stay.

Objectives of Project:

- Create awareness among perianesthesia nurses of pressure ulcer risks associated with operative procedures;
- Provide documentation tools to reflect preoperative/postoperative skin assessment and interventions;
- Identify ongoing efforts to improve quality of assessment, interventions, and documentation in the perianesthesia practice setting.

Process of Implementation:

- Identified key elements of preoperative/postoperative skin assessment, interventions and documentation;
- Refined the documentation elements for our electronic health record;
- Established an implementation date;
- Planned education including presentations on skin assessment, pressure ulcer staging, operative/procedural positioning with associated pressure points, and interventions to reduce risk of pressure ulcer development (repositioning, dry/wrinkle free linens, skin protectors);
- Ongoing audits and walking rounds have been implemented to evaluate quality of assessments, interventions, and documentation.

Statement of Successful Practice: Perianesthesia nurses are now completing skin assessments on preoperative patients and accurately documenting the assessment, recognizing the importance of prevention and risk reduction for our patients. Postoperatively, patients are assessed on arrival to the PACU, skin condition is observed, and interventions initiated and documented.

Implications for Advancing the Practice of Perianesthesia Nursing: Perianesthesia nurses have an important role to play in reducing the risk of pressure ulcer development in operative and procedural patients. Creating awareness and designing appropriate assessment, interventions, and documentation will help the nurse provide quality care and reduce risk.