Pressure Ulcer Treatment Protocol

The following orders were developed collaboratively with Medical Staff and Patient Care Services and approved by the Medical Executive Committee on (10/14/2013) to address the recommendations of evidence-based pressure ulcer treatment.

If a patient is noted with a pressure ulcer, initiate the following interventions pending other orders from physician:

1. Initiate Prevention of Pressure Ulcer Protocol.
2. Complete Pressure Ulcer Staging Form & place in chart behind “Progress Notes” tab.
3. For Stages III, IV, Suspected Deep Tissue Injury, or Unstageable ulcers, if patient is able to take oral nutrition, place an order and give 1 packet Juven twice daily. If you are unable to place the Juven order electronically, you must scan this orderset to Pharmacy.
5. Stage I: Skin reddened but no open ulcer—leave open and observe every shift.
6. Dry, stable black/brown eschar or intact blisters on heels, feet, or toes: Paint daily with Povidone-Iodine solution such as Betadine swabs unless allergic to iodine or shellfish. Leave uncovered or apply dry gauze/roll gauze for protection and change daily.
7. Stage II: Open, shallow, red/pink ulcer—Clean with saline or dermal wound cleanser such as SafClenz and cover with protective foam such as Mepilex Border and change every 2-3 days and prn dislodgement or soilage.
8. Stage III or IV: Deep, moist, or necrotic ulcers—Clean with saline or dermal wound cleanser such as SafClenz and pack/dress with saline-moistened gauze, cover with dry gauze and/or abdominal pad and change twice daily.
10. Teach patient and caregivers about pressure ulcer prevention (Krames Healthsheets can be used to guide teaching)
11. In addition to Juven, if patient is on oral nutrition but consumes ≤ 50% of every meal offered for 3 consecutive days, start the following oral supplement:

<table>
<thead>
<tr>
<th>Medical Condition/Diet Order</th>
<th>Supplement</th>
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</thead>
<tbody>
<tr>
<td>Without diabetes or dialysis</td>
<td>Ensure Enlive by Abbott 1 twice daily</td>
</tr>
<tr>
<td>On dialysis (with or without diabetes)</td>
<td>Nepro (Carb Steady) 1 twice daily</td>
</tr>
<tr>
<td>Diabetic (not on dialysis)</td>
<td>Glucerna 1 twice daily</td>
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<tr>
<td>Renal impairment (not on dialysis, but GFR ≤ 60)</td>
<td>Suplena 1 twice daily</td>
</tr>
<tr>
<td>Clear liquid diet</td>
<td>Ensure Clear 1 three times daily</td>
</tr>
</tbody>
</table>

***If on thickened liquids, thickener must be added
***If fluid restricted, additional fluid from supplements must be counted as part of total fluid allotment

_____________________________  _____________________  _____________________
 Date        Time        Physician Signature