What you can do

Move, move!

- Keep moving as often as you can. Even small movements help.
- Change your position frequently when in bed or sitting in a chair. Talk to your healthcare professional about position changes.
- If you are unable to move yourself, the staff will help you to change your position regularly.

Look after your skin

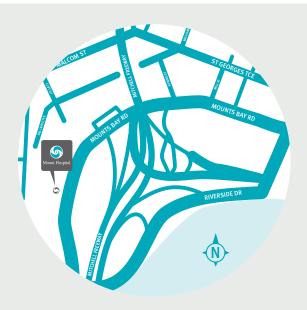
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- Advise staff if you have any tenderness or soreness over a bony area or if you notice any reddened, blistered or broken skin.
- Keep your skin and bedding dry. Let staff know if your clothes or bedding are damp.
- Special equipment such as air mattresses and cushions may be used to reduce the pressure in particular places.
- Avoid massaging your skin over bony parts of the body.
- Use a mild skin cleanser.

Eat a healthy diet

• Take nutritional supplements as advised.

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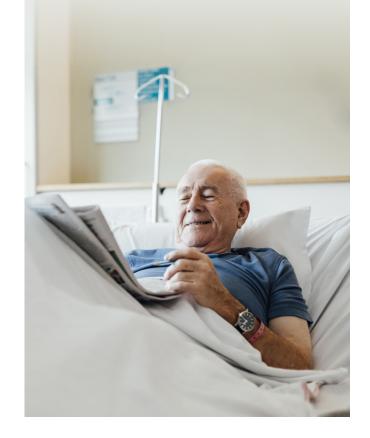
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Pressure injury prevention

Information for patients, families and carers



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What is a pressure injury?

A pressure injury is also known as a pressure ucler, pressure sore or bed sore. They are caused by unrelieved pressure and/or shear forces on any part of the body. Anytime you lie or sit down in the same position for a period of time, pressure is applied to different parts of your body. Any object that has continuous contact with your skin has the potential to cause a pressure injury.

Why are pressure injuries a problem?

A pressure injury may look minor such as redness of the skin, but they can hide more damage under the skin surface. A pressure injury can develop quickly, cause significant pain, become infected, leave scars and may delay your recovery by weeks or months.

- red/purple/blue skin
- blister

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- swelling
- dry patches
- shiny areas
- warm or cool areas

Who is at risk?

Any person of any age may be at risk. Factors that may increase the risk of developing a pressure injury include:

- general poor health or weakness
- limited mobility
- poor nutrition and hydration
- weight loss or weight gain
- lack or sensory perception e.g. diabetes, spinal cord injury, multiple sclerosis
- urinary and faecal incontinence
- excess moisture or dryness of skin
- past history of a pressure injury

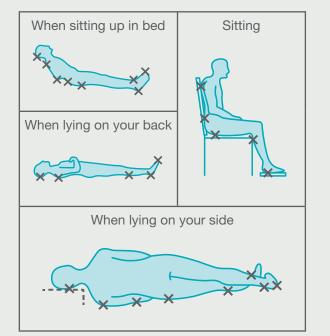
Let staff know if you notice any warning signs or if you have any questions or concerns.

Skin inspection should happen on admission and where there is a change in skin or medical condition.

If you haven't had a regular skin inspection, speak with your healthcare professional.

Where to look?

Pressure injuries usually occur over bony areas – especially the heels, elbows, hips, buttocks and tail bone but can occur anywhere there is continued pressure to the skin. The diagram below illustrates places on your body at risk of pressure injury.



For more information, speak with your healthcare professional.

Patients, families and carers are encouraged to be involved in discussions and decisions about the prevention and management of pressure injuries.

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