

Tissue Viability Team

A Guide to Preventing Pressure Ulcers (also known as pressure sores or bed sores)

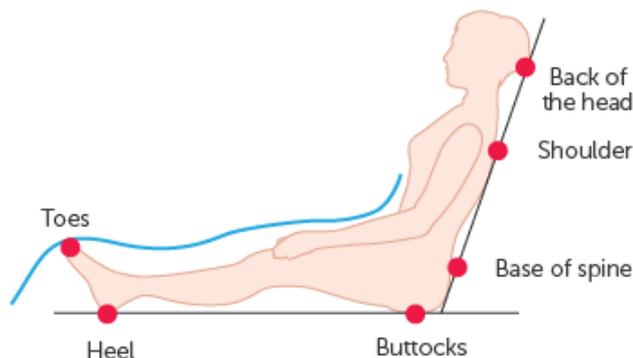
What is a pressure ulcer?

A pressure ulcer or bed sore is an area of the skin and underlying tissue which is damaged. This is due to lying or sitting in one position for too long without moving, or by rubbing, dragging or sliding down or across the bed, which can strip off the top layers of the skin.

What to look for

Pressure ulcers are most likely to develop over bony areas. The areas most at risk are the heels, bottom, and base of the spine, elbows, shoulders and the back of the head.

- Red or darker patches of skin which do not disappear within 1-2 hours.
- Areas of the skin that are hot or cold
- Discomfort or pain
- Blistering
- Any numbness, soreness, swelling or hardening of the skin.



Cancer Research UK
Original diagram by the Tissue Viability Society



Who is at risk?

Any one can be at risk; however people with an increased risk of developing a pressure ulcer are those who:

- Have difficulty moving and changing their own position
- Are not eating or drinking properly
- Are in pain and therefore not moving as much
- Have difficulty controlling their bowels or bladder causing the skin to be damp
- Are frail, elderly or weak
- Have lost sensation to some parts of their body
- Have a serious illness or are undergoing surgery
- Have diabetes or poor circulation

What can you expect from your healthcare professional?

Assessment: we will assess you within six hours of being admitted to hospital, to check your risk of developing a pressure ulcer. We will continue to regularly assess your skin.

Surface: We will give you the mattress and cushions that you need depending on your level of risk

Keep moving: If you can't move by yourself, we will help with repositioning, using equipment as needed.

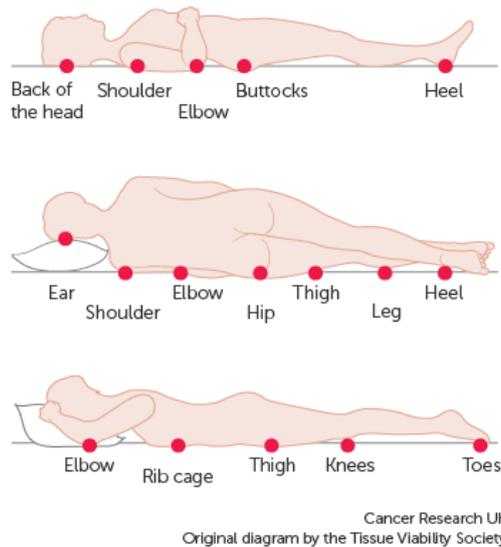
Incontinence: If you have difficulty using the toilet, we will make sure your skin is kept clean and moisturised.

Nutrition: We will keep an eye on how well you are eating, and help you if you need it. We can offer supplements and snacks and refer you to a dietician if you are identified as at risk.

What can you do to prevent a pressure ulcer?

Skin: If you are able to, check your skin regularly or ask a relative or carer to do this. If you have red areas, make sure you don't put any pressure on these, particularly on 'at risk' areas of skin.

Patient Information



Keep moving: One of the best ways to prevent a pressure ulcer is to take the pressure off the 'at risk' areas by regularly changing position. This can be as simple as standing and walking on the spot for a few minutes every hour if you are able to.

- If you are sitting, try and lift your bottom off the seat regularly.
- If you are in bed, try to change your position without digging your heels into the bed as this can cause damage.
- Try not to slide down the bed as this can damage the skin – ask a health professional for advice if this is a problem.

Incontinence: Wash and dry your skin carefully. Do not use talcum powder or perfumed soap as these can dry the skin out. If you have difficulty controlling your bowels or bladder, speak to your nurse or doctor about the best way to control it.

Nutrition: Eat a well-balanced diet and drink plenty of fluids

Key points to remember

- If you need help, don't be afraid to ask
- Try to keep moving
- Eat a balanced and varied diet
- Wash and dry your skin carefully
- Look out for red or darker areas of skin, or changes in texture

Patient Information

- Remember special equipment is available for those at risk of developing pressure ulcers

Contacts whilst in hospital

- Health professionals on the ward
- Tissue viability link worker on your ward or department – ask a member of staff
- Tissue Viability Team Tel: 024 7696 6154

Contacts once you are at home

- Your own doctor (GP)
- District Nurse
- Practice Nurse
- Carer

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