

# **Reducing Healthcare-Acquired Pressure Injuries: Literature Review**

Kaitlyn Loewenstein

Lakeview College of Nursing

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Professor Bosch

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**Reducing Healthcare-Acquired Pressure Injuries: Literature Review**

Long-term pressure from immobility causes pressure injuries, typically occurring at bony prominence points and harming the skin and tissue. Medical equipment can also cause pressure injuries. Patients in the intensive care unit are more likely to develop pressure ulcers due to being critically ill and bedridden. A literature review aims to offer a thorough overview and analysis of the body of knowledge on a particular subject or research question (*Literature Reviews*, 2021). Patients' safety is a concern when pressure ulcers occur. Serious side effects such as infections, cellulitis, sepsis, and even death may develop. In order to ensure the safety and well-being of patients in medical settings, pressure ulcers must be treated and prevented. Nurses must find ways to help prevent pressure ulcers in critically ill patients.

### **Risk Factors For Pressure Injury In Patients With COVID-19 in the Intensive Care Unit**

Patients enrolled in the trial were admitted to the ICU between April and December 2020. A data collection tool with demographic and clinical factors was used to obtain data through electronic medical records. This study examined whether people with upper respiratory tract infections were more likely to experience changes in skin integrity that could impact the development of pressure ulcers. This study aimed to identify and examine the risk variables that may contribute to the development of pressure ulcers in COVID-19 patients receiving intensive care.

### **Key Points**

The study found that some intrinsic and extrinsic risk factors make critically ill patients more susceptible to developing pressure ulcers. This descriptive study was created in an intensive care unit and used a quantitative, retrospective approach. The study primarily used ICU patients with respiratory diseases such as COVID-19 or pneumonia. This research found that the

aging process causes changes in the susceptibility of the elderly, a risk group for COVID-19, to infections and the development of pressure ulcers. “When applying the chi-square test, a p-value of 0% was obtained, i.e., lower than the 5% significance level, and therefore, the hypothesis of independence between the comorbidity and PU variables was rejected” (Povoas Costa et al., 2022). The management of the patient with COVID-19 was discovered to be unusual and challenging during the research, and multiple factors played a role in this conclusion.

### **Assumptions**

Patients can be prone to pressure ulcers based on underlying issues, not only due to a lack of mobility. The prevalence of comorbid conditions in patients, such as diabetes mellitus and hypertension, increased the occurrence of pressure ulcers. The Braden Scale is another significant consideration. When used to assess the patient's risk of pressure ulcers at admission, it allows for the possibility of taking preventative measures (Povoas Costa et al., 2022). Health workers in critical care require safety and expertise to execute the procedure efficiently, placing the pads and preventive dressings in the appropriate locations with increased vulnerability.

### **Deficit/Conclusion**

Risk factors for the formation of pressure ulcers include duration of stay, use of mechanical breathing, pronation, use of sedatives and vasoactive medications, antibiotic therapy, enteral food, and zero diets, as well as clinical and hemodynamic instability (Povoas Costa et al., 2022). This article aims to determine if comorbid diseases play a role in pressure ulcers. The role of nurses in preventing pressure ulcers is crucial. Ensuring patient safety, encouraging positive results, and providing high-quality care depend on their work. The role of nurses in preventing pressure ulcers has wide-ranging consequences that touch on a variety of patient care, advocacy,

coordination, education, monitoring, wound care, support, quality improvement, and professional development topics. They play a critical role in reducing pressure sores, fostering patient safety, and improving the standard of care.

*Literature reviews*. The Writing Center, University of North Carolina at Chapel Hill (2021, September 21). <https://writingcenter.unc.edu/tips-and-tools/literature-reviews/>

Povoas Costa, L., Silva Barcellos Caetano, D., Silva dos Santos, J., & Silva Solano Ramos dos Santos, P. (2022). Risk factors for pressure injury in patients with covid-19 in Intensive Care Unit / Fatores de Risco para Lesão por pressão em pacientes com covid-19 em Unidade de Terapia intensiva. *Revista de Pesquisa Cuidado é Fundamental Online*, 14, 1–7. <https://doi.org/10.9789/2175-5361.rpcfo.v14.11787>

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### **Deficit/Conclusion**

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### **Conclusion**

Write a conclusion here in your overall paper. Follow the MEAL paragraph formatting and use Grammarly.com. Provide a summary/conclusion of the analysis of all three articles.

Discuss how the information can improve:

- Patient outcomes
- Nursing practice
- Evidence-based practice/Quality Improvement efforts
- Healthcare as a whole

## References

Albright, C., & Whelan, P. (2019). Learning reflection: A nursing student recounts her experience with a medical emergency team. *Alberta RN*, 67(6), 27. [www.nurses.ab.ca](http://www.nurses.ab.ca).

\*As you can see the reference is centered and is bolded. The first line is NOT tabbed over, all other lines are, this is called hanging indentation. All references are double spaced. All sources should be listed in alphabetical order. Be sure to use the APA 7<sup>th</sup> edition and guide for your reference page.