

Pressure Ulcer Prevention:

Literature Review

Ashley Miller

Lakeview College of Nursing

Pressure Ulcer Prevention

Discussing in my qualitative paper is pressure ulcer prevention and how they have a significant effect on the healthcare field. Pressure ulcers also called bedsores to come about when the soft tissue of the skin pressed against a hard surface for a long time (Preventing Pressure Ulcers: MedlinePlus Medical Encyclopedia, 2016). When the body is lying in that position for a long time, the blood supply begins to decrease in that area and can cause the skin to die or be damaged (Preventing Pressure Ulcers: MedlinePlus Medical Encyclopedia, 2016). According to the Centers for Disease Control and Prevention (2019),” about two million patients suffer from hospital-acquired infections every year, and nearly one hundred thousand deaths.” Pressure ulcers kill more patients in a year than cancer (other than lung cancer), making them one of the significant health issues in healthcare (Pressure Ulcers Cost the Health System \$26.8 Billion a Year, 2018).

Nurses’ perceptions of pressure ulcer prevention care bundle: a qualitative descriptive study

This article aims to test a pressure ulcer prevention care bundle (Roberts et al., 2016). In the section, there were eighteen nurses from four different hospitals in Australia that participated in the trial (Roberts et al., 2016). Five main themes went into this bundle, and they are aware of the pressure ulcer prevention care bundle (PUPCB) and its similarity to current practice, improving awareness, communication, and participation with the PUPCB, appreciating the positive aspects of patient involvement in care, perceived barriers to engaging patients in the PUPCB, and partnering with nursing staff to facilitate PUPCB implementation (Roberts et al.,

2016, para. 3). Nurses need to communicate and be aware of their patients to be sure they are getting better and not worse.

Key Points

The nurse and patient are encouraged to have the patient participate in the pressure ulcer prevention (PUP) by using three simple steps: keep moving, look after your skin, and eat a healthy diet (Robert et al., 2016). The nurse's feedback to the PUPCB, to some nurses, the PUPCB did not add or already reflected off their practice in the field of work (Roberts et al., 2016). To other nurses, it strengthened the line of training that already implemented (Roberts et al., 2016). With this PUPCB, is believed to help do better in the healthcare field to help make the patients and nurses work together to keep the pressure ulcers down in the setting (Roberts et al., 2016).

Assumptions

The primary premise for the author's thinking about the PUPCB is to help make nurses and patients more aware of pressure ulcers and their severity. By using PUP, care is a great implementation to help keep patients at a high risk aware of the three simple steps they can take to help prevent the ulcers which keep moving, look after your skin, and eat healthily (Roberts et al., 2016). The care bundle also helps the nurses by taking part in the load off as long as the patients can follow the three simple steps to keep pressure ulcers down. Overall, the article is an excellent assumption of how to control pressure ulcers.

Deficit/Conclusion

The article shows that as a nurse and patient on how they can work hand in hand to keep specific issues such as pressure ulcers under control. With the PUPCB, many nurses responded favorably to having patients participate in the care (Roberts et al., 2016). By keeping the new care system simple and easy to implement will help nurses and patients work closely together (Roberts et al., 2016). The more the nurse lets the patient do for themselves, the more likely the patient will be to participate in the care they need.

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Key Points

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Assumptions

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Deficit/Conclusion

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Conclusion

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References

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