

Inpatient **Pediatric Pressure Injury Prevention Care Plan**

- Full skin assessment, including under devices (e.g., splints, IV's, NG's, GT's)**
 - Q12hr
 - Q4hr in perfusion-compromised patients
 - In the operating room at the end of cases lasting \geq 4 hours and/or on arrival to PACU/PICU

- Rotate devices on regular basis, when possible**
 - Each shift
 - Timed with care
 - Protect skin under devices that cannot be rotated (can utilize foam dressings)
 - Rotate pulse oximetry q2-4h

- Turn/reposition the patient on regular basis, when possible**
 - Q2hr
 - Timed with care

- Positioning: Elevate head of bed to \leq 30 degrees unless medically contraindicated**
 - If head of bed needs to be elevated for feeding or care, ensure patient not left in that position for an extended period of time

- Pressure reducing mattress: Initiate specialty mattress**
 - Alternating pressure mattress Foam mattress
 - Low-air loss mattress Gel mattress

- Protect heels, sacrum, and other bony areas**
 - Offload on pillows Gel pads
 - Others: _____

- Minimize layers of material between patient and surface**
 - Use disposable breathable under pad instead of blue cloth lifter/soaker pad
 - Use loose-fitting sheet over specialty mattress
 - Use 1 underwear/brief/diaper

- Moisture Management**
 - Keep skin clean and dry Use moisture-wicking fabric
 - Apply barrier creams to all diapered patients and regular moisturizer to dry skin

- Nutrition:**
 - Maximize nutrition Monitor intake Consult Registered Dietitian

- Enter an SOR if a new pressure injury is identified, or an existing pressure injury worsens**

- Consult team members**
 - OT PT Wound Nurse Surgery Others _____
 - Consult Wound Nurse or Surgery if a pressure injury is identified