### 3) ASSESSING PRESSURE SORES

(a.k.a. Pressure Ulcers or Bedsores or Decubitus Ulcers)

A pressure sore is an area of skin that breaks down due to unrelieved pressure.

#### PRESSURE SORE BASICS

They may occur despite good care.

Typically occur over bony prominences (hip, heel).

Contributing factors include malnutrition and immobility.

Categorized into 4 stages ranging from superficial to deep (see table on following page). If a scab is present, a medical professional must remove the scab before the ulcer can be staged.

Treatment consists of relieving the pressure, cleaning the wounds and keeping the area clean and dry (see diagram on page 72.)





# signs that may indicate abuse include: Unusual location (e.g. head, inner part of leg, wrist)

- Malodorous wound
- Multiple locations and on more than one plane of the body
- No obvious attempt at care/treatment, especially for stage III or IV wounds (e.g. a lot of dead tissue or debris)

# If the person's pressure sores seem suspicious, document and photograph:

- Pressure sore location(s)
- Number of pressure sores
- Appearance
- Size
- Presence of odor
- Whether or not there was an attempt at treatment
- What the treatment was (if any)
- Whether or not the development of pressure sores was known and documented
- What was in the care notes (if any)

## **PRESSURE SORES** Stage and Skin Diagram Appearance Approx. Time of Skin to Develop Stage 1: At Epidermis Red area Minutes with intact to Hours skin. Redness **Epidermis** Dermis persists even Subcutaneous when pressure is relieved Tendon/muscle Bone Stage 2: To Dermis Hours Appears open like to Days an abrasion or shallow crater, or may be a blister. Stage 3: To fat tissue Full thickness Hours skin loss, to Days deeper than to Weeks a superficial wound, but not as deep as stage 4 Stage 4: To muscle, tendon, bone May see Days to Weeks bones, muscles, or tendons Stage 4 with a scab