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Unmasking the Leading Injuries in Hospitals and a Promising Change

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Abstract

The problem that will be studied is the increased development of pressure ulcers among hospitalized intensive care unit patients. The incidence of pressure ulcers is increasing due to our aging population and the increase in the elderly living with disability. Learning how to manage pressure ulcers appropriately and effectively is increasingly important for all professionals in wound care. The review of the literature shows, hospital-acquired pressure ulcers are expensive to treat with the U.S. median cost at \$39,000 per patient stay and costing U.S. health care system \$3.6 billion per year. Several interventions and preventive measures are current used to avoid HAPUs including patient repositioning, proper nutrition, pressure relieving support surfaces (foam mattress) and skin care. The most effective preventive measure currently is frequent patient repositioning to avoid prolonged pressure on body surfaces. However, the compliance in this nursing intervention has proven insufficient, especially with night shifts being less staffed. The need for real-time documentation in the electronic medical record of repositioning events is needed. New technology is showing promise with reusable, low-cost patient repositioning monitoring solution that consist of two PUMP1 and PUMP2 (pressure ulcer monitoring platform). PUMP1 and PUMP2 showed 85% reliability with patient repositioning and documentation into the electronic medical record. Data will be collected from 300 patients within WellStar's Hospitals in the ICU. The groups will be divided into a control group that will consist of traditional pressure ulcer prevention and a study group that will consist of using the PUMPs with traditional prevention. The evaluation will compare the rates of incidences between the two groups and will demonstrate the degree of prevention of the development of pressure ulcers. These results will be completed over a four-month time period.