Revalidation of the Acero-Kurtz perioperative skin bundle

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Significance

The Operating Room (OR) is a high-risk environment for hospital-acquired pressure injuries (HAPI) due to a number of factors including:

- Operative time and prolonged immobility
- Inability to perceive pain or discomfort from unrelieved pressure
- Friction and sheering forces
- Relatively hard support surfaces^{1,2}

In 2019, 38% of all HAPI at a 500+ bed teaching hospital were contributed to the OR. The Prevention and Treatment of Pressure Ulcers/ Injuries: Clinical Practice Guideline published in 2019 recommends considering expected surgical time and patient position in HAPI risk assessment and using soft silicone multi-layered foam dressings to protect the skin on high pressure areas³.

Purpose

The purpose of this study was to test whether OR-related HAPIs could be reduced through the use of a perioperative HAPI risk screening tool and an associated bundle which included the use of soft silicone multi-layered foam dressings.

Process

 A pre/post-test design was used and statistical significance of pressure injury outcomes was determined using Fisher's Exact Test

 The baseline period was 10/2019–09/2020 and the intervention period was 10/2020–09/2022

 The Acero-Kurtz Perioperative Skin Assessment Tool was implemented for all surgeries

• Any "yes" answer resulted in activating an OR skin bundle which included pre-surgical skin assessment, safe patient handling, and use of positioning devices

 Any 2 "yes" answers or repeat surgery during the admission identified the patient as high risk and triggered the use of the OR skin bundle and the application of prophylactic soft silicone multi-layered foam dressings based upon surgical position

 OR staff and nursing leadership were educated on the Acero-Kurtz Perioperative Skin Assessment Tool. The tool was integrated into the electronic medical record.

The Acero-Kurz Perioperative Skin Bundle. Includes the modified PRAMS risk assessment tool and the associated perioperative interventions.

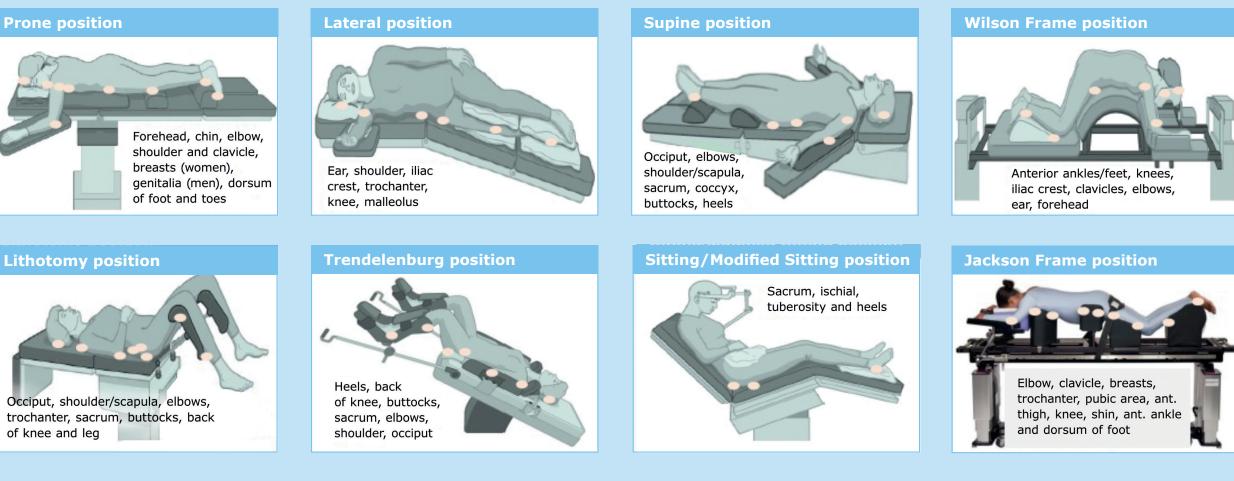
If a patient identified as high risk for developing a pressure injury, a perioperative skin bundle protocol should be implemented to mitigate harm. A bundle is a set of evidence-based interventions to help standardize care and reduce complications in the _ MR#: ______Date: _____ Patient name:

All patients receiving general ar Braden score ≤16 Preexisting pressure injury Surgical time ≥3hrs OR Skin Bundle includes the fol Use Safe Patient Handling device f For offloading of pressure on all are rendelenberg and Sitting, apply m Maintenance of normothermia (Rar licroclimate management by using Monitor skin pressure points during RN sia RN name;

Post OR procedure	Check here			
Assess the integrity of the multilayer silicone foam border dressing				
Assess and "peek" the skin under silicone foam border dressing				
Document any skin integrity changes on flowsheet				
Handoff report includes skin assessment and preventive skin dressing sites				
Microclimate management by using disposable pads				
Patient is ambulatory or transferred out from PACU and mPRAMS is discontinued as of date:				
RN name; RN signature: Date:Time:				
The Acero-Kurtz Perioperative Skin Bundle is adapted and modified from Perioperative Risk Assessment Measure for Skin (PRAMS) with Permission				

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Staff education provided on placement of soft silicone multi-layered foam dressings based on surgical position.

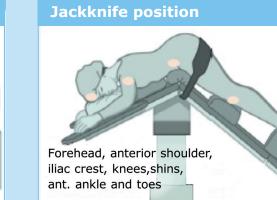


An NUMC Perioperative Skin Assessment Tool

sthesia will be assessed for the following risk factors	YES	NO	N/A
once during this admission			

YES" to any 2 risk factors please implement OR skin bundle
Repeated/return to OR as a stand-alone criterion is considered as high risk therefore an OR Skin Bundle will be implemented. ___ RN signature:_____ Date: ____Time: _____

Check here



Outcomes

- 100% staff education a
- During the intervention patients met the criteri received OR skin bundle silicone multi-layered f
- OR-related HAPI incide 1.9% in the baseline pe
- This project demonstration education and the impl including the use of sof dressings, activated thr screening process, the OR can be significantly

Results	Pre-protocol implementat (10/2019 – 09/2020)
Total number of OR patients	311
Number that met bundle criteria	Not applicab
OR- acquired HAPI	6

*ALLEVYN^{\$} LIFE Foam Dressing, Smith and Nephew, Hull, UK.

References:

- J Wound Ostomy Continence Nurs. 2022;49(1):89–96.
- **2.** Primiano M, Friend M, McClure C, et al. Pressure ulcer prevalence and risk factors during prolonged surgical procedures. Aorn j. 2011;94(6):555–566.
- Prevention and treatment of pressure ulcers/injuries: clinical practice guidelines. 3rd ed. 2019.

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•	ence of HAPI in the	
ion	Post-protocol implementation (10/2020 – 09/2022)	
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le	93	
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1. Creehan S, Black J. Defining Practices to Avoid Hospital-Acquired Pressure Injuries in the Operating Room.

3. European Pressure Ulcer Advisory Panel (EPUAP) NPIAPN, Pan Pacific Pressure Injury Alliance (PPPIA).