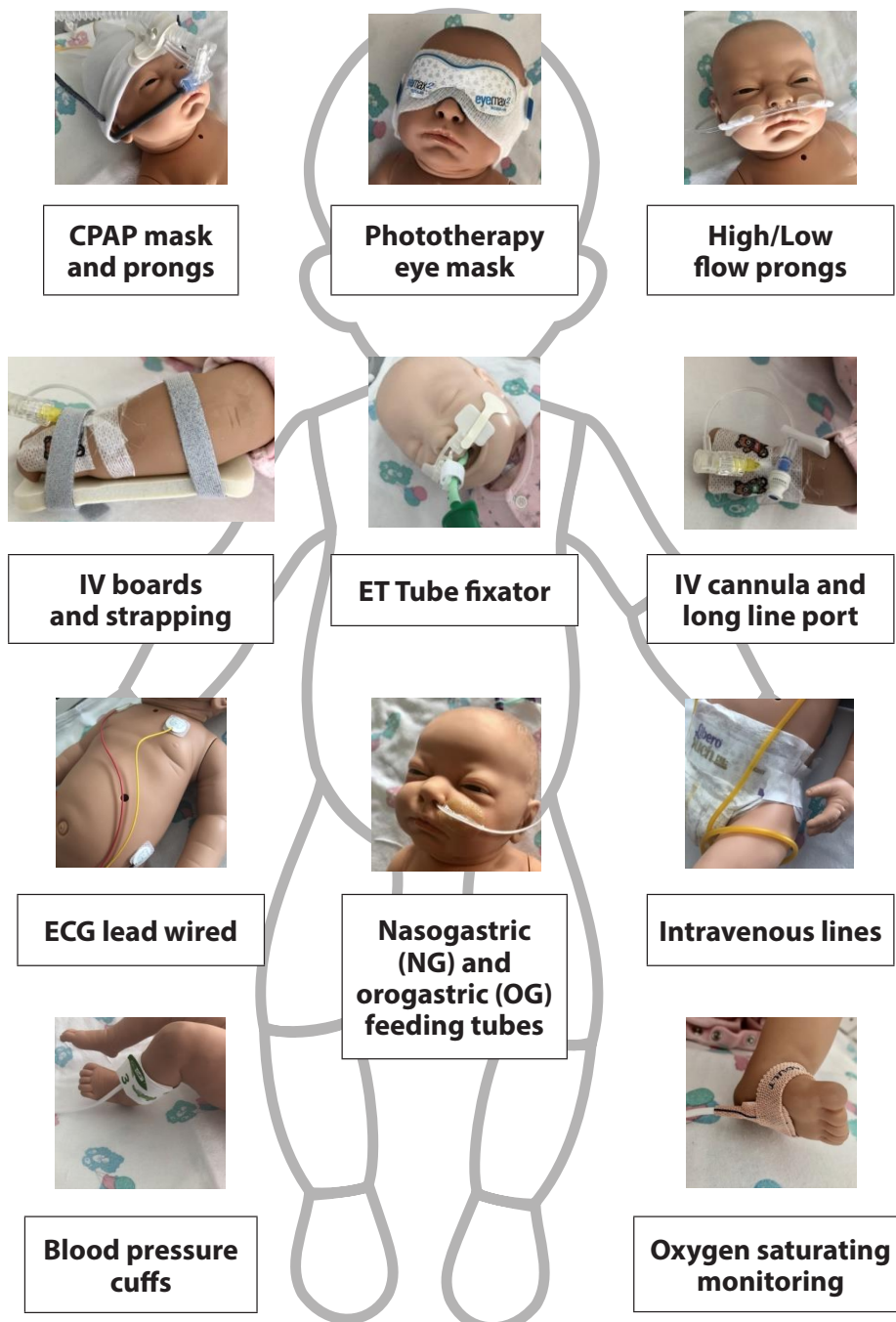


Prevention of Neonatal Medical Device Related Pressure Ulcers (DRPU)

- Pressure ulcers resulting from the use of a device for therapeutic purposes, such as CPAP, are known as MDRPU.
- Preterm babies have immature skin and are more at risk of developing MDRPU as medical devices are constantly in contact with the skin.
- MDRPU is defined as a localised injury to the skin or underlying tissue as a result of continuous pressure from a device (Barahrestani and Ratliff 2007).
- Babies could deteriorate, develop oedema and the skin could become less tolerant. Also excessive moisture around skin areas such as respiratory support humidity could contribute to the development of a pressure ulcer (Chandler et al 2016).



Assessment:

SELECT ensuring that the device is fitted correctly.

Management:

REPOSITION and/ or offload pressure from the device every three hours as a minimum in order to provide pressure relief. Alternate mask and prongs at least 6 hourly for CPAP.

INSPECT the skin beneath and around the medical device during care times, at least 3 times a day.

CONSIDER the use of a skin protectant to minimise the risk of an MDRPU developing:

- Duoderm.

Evaluation and Referral

ESCALATE any skin changes to a senior nurse.

REPORT all pressure ulcers via:

- Skin Integrity Datix/Dashboard.

DOCUMENT accordingly:

- Skin Integrity Wound Identification Care Sheet and Skin Integrity Wound Assessment Care Plan.

NB: Should the patient become too unstable to have any aspects of the MDRPU prevention plan carried out, this must be documented in the nursing notes.

Skin Integrity Team