



# Improving Capture of Community-Acquired Pressure Injury in the Emergency Department Setting

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ABSTRACT



**Problem Statement:** Patients presenting to the Emergency Department (ED), particularly older patients with underlying diseases and recent admissions to acute or long-term care, are at increased risk for pressure ulcers and may present to the ED with existing pressure ulcers. Emergency nursing training and clinical operational workflow encompasses rapid screening, assessment, stabilization, care, and discharge or admission. However, as incidence of admitted patients boarding in the ED setting has increased, medical surgical inpatient care in the ED setting has become necessary. One critical element of nursing care in this context is skin care, including the identification of pressure ulcers upon entry to the hospital, pressure ulcer prevention, and care of existing pressure ulcers. Identifying existing pressure injuries and preventing new pressure injuries benefits both patients and hospitals, as a single hospital acquired pressure injury (HAPI) can cost a hospital \$500 to \$70,000.

**Purpose:** The Mount Sinai Queens ED clinical nurses developed a quality improvement project with the goals of increasing the rate of community acquired pressure injury (CAPI) discovery in the ED setting and preventing pressure injuries among high-risk patients.

**Approach:** During the pilot period from February to March 2022, a dedicated skin nurse was tasked to perform assessments and care following an 11-point skin log for all admitted patients and ED patients 65 years of age or older.

**Findings:** During the pre-pilot period, there was an average of 3 CAPI discoveries per month. During the pilot period, there was an average of 27 CAPI discoveries per month (89% increase).

**Conclusion:** The development of a dedicated skin nurse in an ED setting has a positive impact on the discovery of CAPI, which is an essential first step in providing appropriate skin care for admitted patients boarding in the ED. The program may also contribute to a decrease in HAPI within the hospital through emphasis on preventive skin care in this population.

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## COMPETING INTERESTS

The authors have no competing interests to declare.

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