

Transparent Gel Dressing Used to Simplify Skin Evaluation and Prevent Pressure Injury

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BACKGROUND/PROBLEM

- Foam dressings are often used to prevent pressure injuries in areas of the body where there is continual contact such as the sacrum, heel, hip, spinal process and neck.¹
- The repetitive removal of adhesive foam dressings can weaken the skin and increase the risk of medical adhesive-related skin injury (MARSIs).²
- The use of a transparent liquid cyanoacrylate barrier film can protect skin at risk from friction and reduce the risk of pressure injuries (PI).³

PURPOSE

To evaluate a transparent gel dressing (TGD)* for the prevention of pressure injuries and MARSIs in patients with skin at risk, to improve patient satisfaction, and to reduce nursing staff time.

METHODS

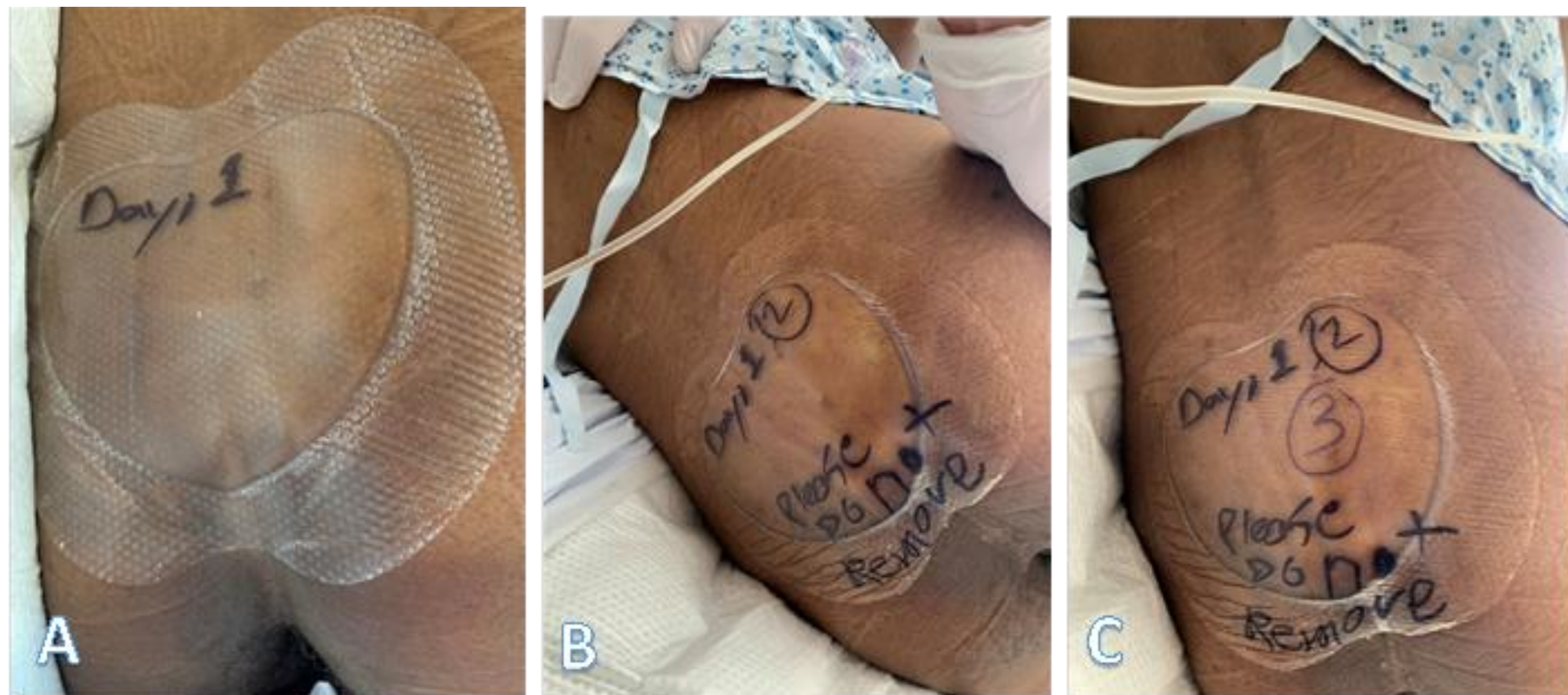
- Twenty patients in this case series were in acute care facilities and at high-risk for pressure injuries and/or MARSIs. Most patients were susceptible to fecal and urine incontinence.
- Prevention of PI to the sacrum, hip, and body areas in contact with medical devices were evaluated for 1-3 days following application of the TGD.

INTERVENTION

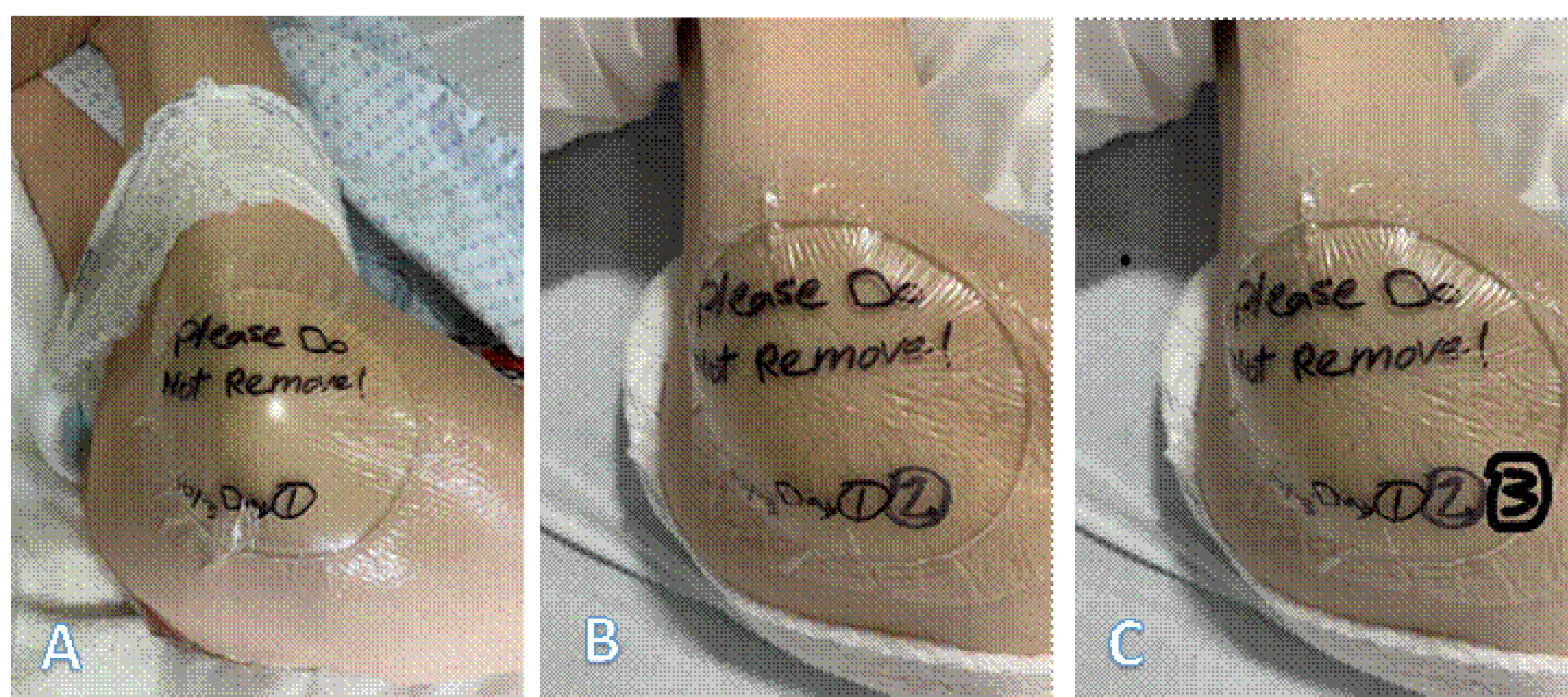
- Application of the TGD required the following steps:
 - 1) Clean the skin with water and dry thoroughly.
 - 2) Apply a skin barrier spray.
 - 3) Wait for 30 seconds for drying of the skin barrier spray.
 - 4) Apply the transparent dressing by removing the liner and applying to the skin.
 - 5) Assess the condition of the skin daily.
 - 6) Capture images on Day 1, 2, and 3

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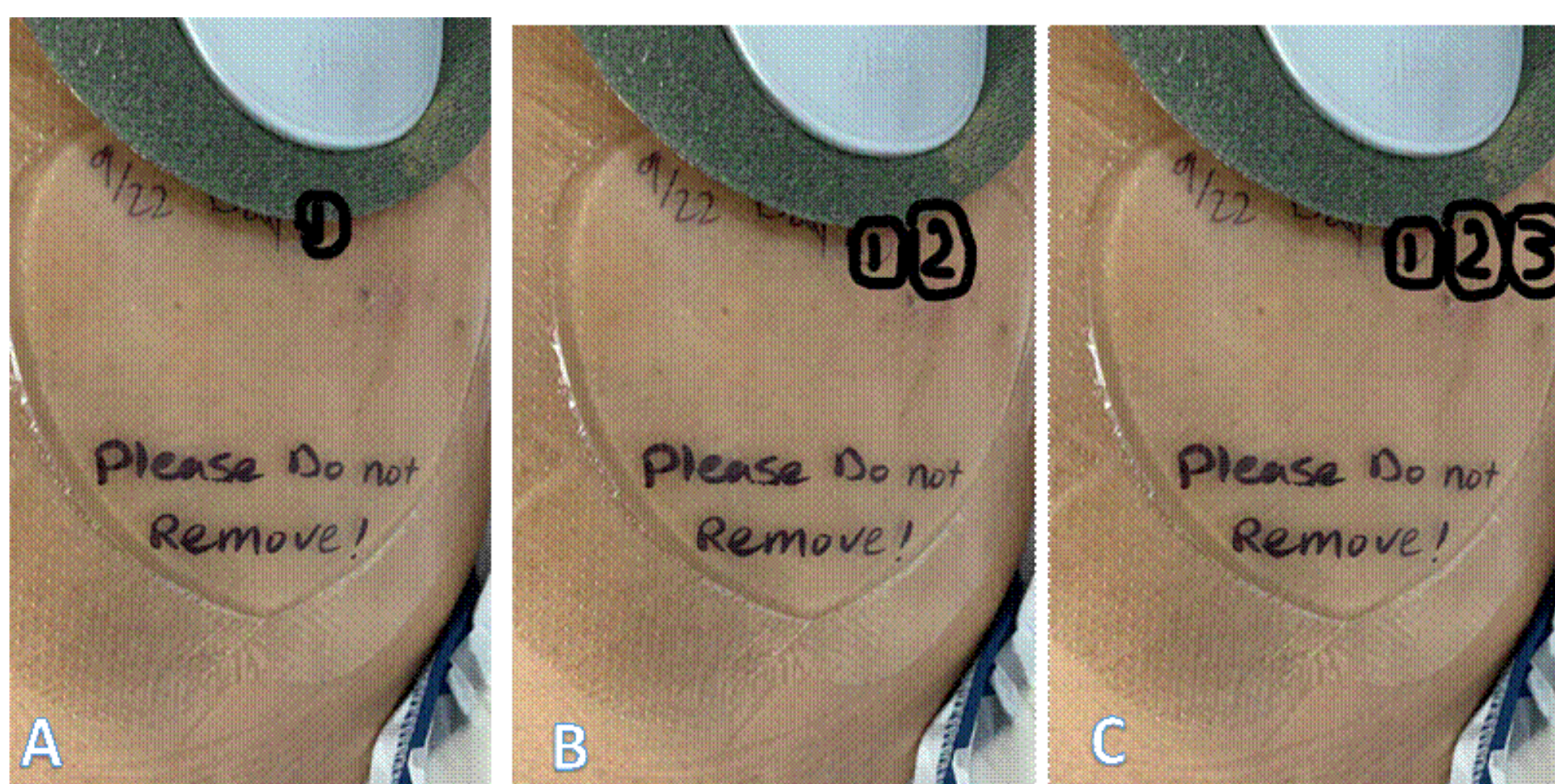
CASE STUDY IMAGES



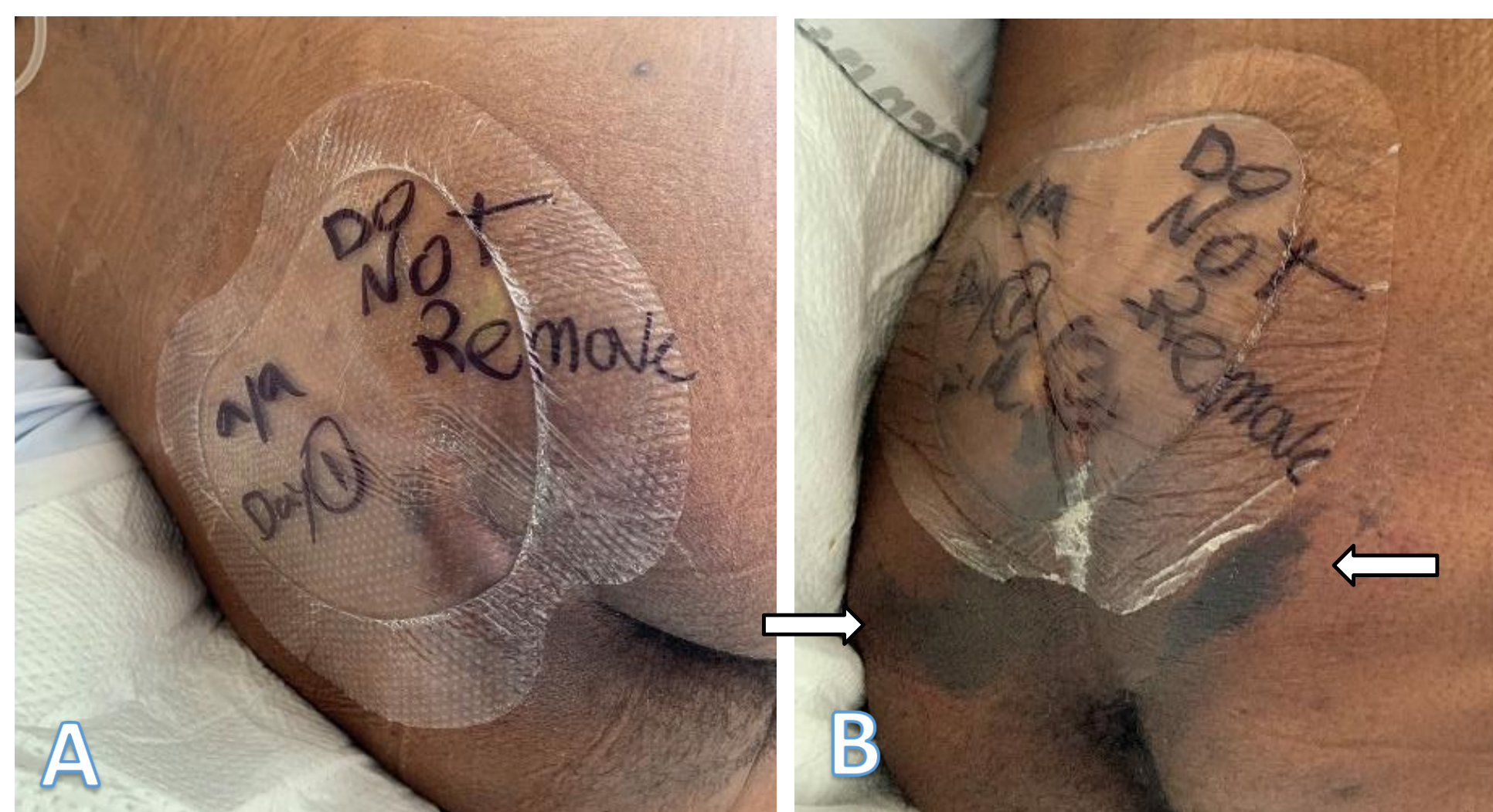
Case 1. Patient in intensive care with Foley catheter and fecal incontinence. TGD on sacrum at A) Day 1, B) Day 2, and C) Day 3



Case 2. TGD on left hip at A) Day 1, B) Day 2, and C) Day 3



Case 3. TGD under medical device at A) Day 1, B) Day 2, and C) Day 3



Case 4. TGD on sacrum at A) Day 1 and B) Day 3. Patient developed deep tissue pressure on bil ischiums where the dressing was not covering (arrows)

RESULTS

- Due to the transparency of the dressing, the nursing staff were able to assess the patient's skin for pressure injury without daily removal of the dressing.
- The nursing care time and number of dressing changes were significantly reduced from every day when using foam dressings to every three days when using transparent dressings.
- All twenty patients had the dressing last for the full protocol time limit of 3 days.
- The skin was at reduced risk of MARSIs that can be caused by frequent dressing changes.
- No incidence of MARSIs were observed.
- Use of the skin barrier spray helped to seal the transparent dressing to the skin.
- The edges of the TGD did not peel off even in patients that were more ambulatory.

IMPLICATIONS for PRACTICE

- We conclude from this case series of 20 patients that a transparent gel dressing can reduce dressing changes from one day to three days (protocol limit) thereby reducing nursing staff time and improving overall patient satisfaction.
- We observed no incidence of pressure injuries or MARSIs within the TGD-covered regions of the skin at risk.

REFERENCES

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