Pressure Injury (PI) Prevention and Management Flowchart

**Patient presents to hospital**

Within 8 hours of presentation, two part PI assessment/screening process to be completed to guide clinical decision making.

- a) Use a validated PI risk assessment tool/process appropriate for the patient population
- b) Skin assessment based on visual inspection

**Does the patient have existing PI?**

- Yes: Reassess as per **BOX A**
  - Complete an IIMS Notification for each PI using the NPUAP/EPUAP classification system
  - For patients with PI, skin inspection and pain assessment should occur at each patient care intervention and/or each positioning change

- No: Is the patient 'at risk'?

  **Yes**: Reassess:
  - If there is a change to health status or mobility
  - On transfer of care
  - If a PI develops
  - At least weekly

  **Box A** - Reassess:
  Daily PI risk assessment using the two part pressure injury assessment and:
  - If there is a change to health status or mobility
  - Pre-operatively, and repeated as soon as possible after surgery
  - On transfer of care
  - If a pressure injury develops

- No: Develop the care plan in consultation with the patient and/or carer
  - Implement prevention strategies appropriate to the level of risk e.g. equipment needs, repositioning
  - Make referrals as appropriate
  - Detailed documentation in patient health care record
  - Communicate PI risk and management at handover and transfer of care