

Nutrition Interventions for Treatment of: Pressure Ulcers



At Risk for Pressure Ulcers?

≥ 5% loss in 30 days, ≥ 10% in 180 days and/or intake < 75% for 7 days and/or BMI < 21 and/or current recent pressure ulcers, impaired ability to eat independently, Braden Score < 18

NO →

Continue Plan of Care

YES ↓

Notify Physician and Family/POA If Pressure Ulcer Present Refer to Dietitian for Assessment (within 24-48 hours for Stage III/IV or non-healing wound)

- Physical Assessment: Body fat/muscle wasting, declines in ADL, decline in handgrip strength, skin assessment, edema, dentition, vision, feeding and drinking ability, chewing/swallowing capability.
- Diagnoses, anthropometrics, food, fluid & nutrient needs, adequacy of intake, laboratory values, medications.
- Estimation of needs for wound healing:
 - Risk of Pressure Ulcers: Mifflin St. Joer with injury/activity factors, protein needs based on albumin level, 30 ml fluid/kg as tolerated, minimum of 1500 ml/day
 - Pressure Ulcer Present: 30-35 kcal/kg actual body weight, 1.25-1.5 g protein/kg of actual body weight, 30-35 ml/kg fluid as tolerated, minimum of 1500 ml/day

Implement appropriate Pressure Ulcer interventions as recommended based on adequacy of oral or enteral intake and wound healing needs

Pressure Ulcer Interventions

- Liberalize diet and asses/honor preferences
- Refer to OT, ST or restorative dining, dentist or psychologist.
- Adjust diet texture as needed.
- Provide feeding assistance and adaptive equipment as needed.
- Add fortified foods & high-calorie snacks, such as *Thrive Ice Cream*
- Provide dining environment that meets needs, including group dining, restorative dining or 1:1 supervision as indicated.
- Monitor intakes, weight, and status of skin breakdown and/or pressure ulcer healing for 4 weeks

Skin intact or wounds healing?

NO

YES ↓

- Continue Plan of Care.
- Ensure resident is meeting nutritional needs.
- Monitor healing weekly.
- Document a minimum of once each month until pressure wound is resolved.
- If resident remains at risk, consider continuation of high calorie snacks such as Thrive Ice Cream.
- Update and revise care plan as needed.

- If new or worsening wound is present, dietitian to reassess nutritional needs and adequacy of intake.

- Assess for changes in resident's nutritional status.

- Implement new interventions, including addition of Thrive Ice Cream.

- Revise care plan.

- Continue to follow resident at least once each month until wounds are healed.

YES

Continue Plan of Care

Skin intact or wounds healing?

NO

- Discuss with Interdisciplinary Care Team the need for Wound Care Consult.
- Assess physical status, meal intake and any available labs for potential nutrient deficiencies.
- Add multivitamin with minerals.
- If Vitamin C or Zinc deficiency suspected or confirmed, consider adding supplement for 14 days.
- Monitor and revise Plan of Care as needed.

