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No Pressure! – Getting to Zero Hospital-Acquired Pressure Injuries on Extracorporeal Life Support Patients

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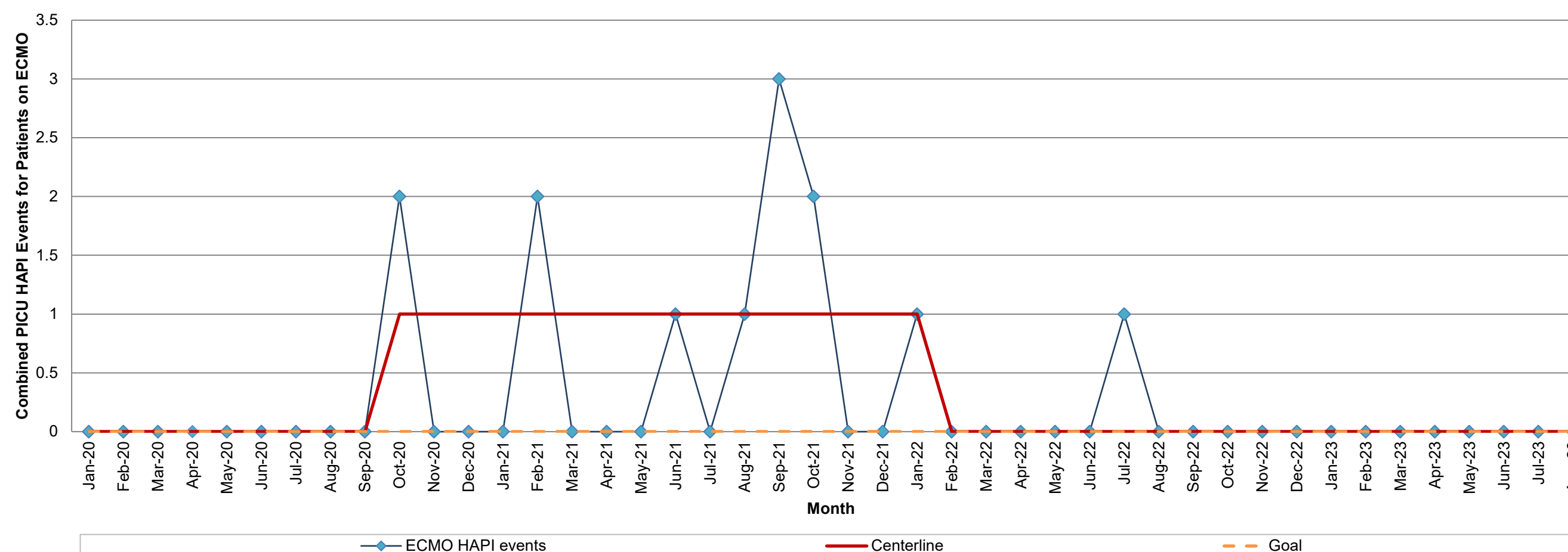
Background

Patients on extracorporeal membrane oxygenation (ECMO) are at an increased risk for pressure injuries due to immobility and device-related issues¹. Bedside staff are often reluctant to move and turn these critical patients as they can desaturate and take time to recover. Many ECMO patients also have cannula position issues that make repositioning problematic if flow is interrupted. In 2021, of the 59 patients that were on ECMO, 11 developed a pressure injury during their admission.

Methods

With the direction and guidance from the PICU HAPI Committee and the ECMO team, a number of interventions were implemented over the course of 2022 with the goal of reducing our pressure injury events to zero. Such interventions included revamping the ECMO canulation checklist to include an item for checking skin integrity, adding the Tortoise repositioner, InterDry, and the crib-sized Dabir overlays to our product list, the development of a turning and repositioning guideline for high-risk patients, and additional education for all PICU staff members.

Title: HAPI Rate for Patients on ECMO
AIM statement: Reduce the average HAPI events per month for patients on ECMO to 0 by December 31, 2022



Results

After taking into consideration the unique issues of ECMO patients and putting measures into place to address these issues, our pressure injuries in 2022 decreased to 2 of the 57 patients who were on ECMO during the year. Additionally, this trend has continued and we have not seen a pressure injury for an ECMO patient for the first eight months of 2023.

Discussion

Pressure-injury prevention is a practice that must be owned by bedside staff in order to provide the most appropriate support. Through the partnership with the nursing HAPI Committee and the ECMO team, we were able to implement interventions at the bedside that positively impact the quality of patient outcomes for our most critically ill patients. We will continue to advocate for our patients when it comes to safety and will continue to aim to keep our pressure injury rate at zero.