

Pressure Injuries & Nutrition

Malnutrition correlated with a fourfold higher risk for developing a PI. (NPUAP: Clinical Practice Guideline 2014)

Water comprises nearly 60% of adult body weight. Water plays a role in wound-site hydration, oxygen perfusion and removes waste from cells.

Dehydration is a risk factor for wound development. Residents with draining wounds need additional fluids to replace losses.

Healthy Eating Impacts Healthy Skin

Decreased intake of food and fluids leads to malnutrition and dehydration, placing the resident at a high risk for pressure injury (PI) development.

Early Identification Tips for Residents at High Risk for Nutritional Decline

- Sudden illness: Flu, colds, pneumonia, fever, diarrhea, constipation, etc.
- Long-term illness: Stroke, diabetes, heart failure, etc.
- Dementia: Cognitive loss, confusion
- Change in behavior: Combativeness, refusal of care or food, agitation, sadness, loss of self-worth
- Open areas: Pressure, skin tears, abrasions, etc.
- Pain: Chronic vs. acute, non-pharmacological interventions
- Restraints: Physical and chemical
- Medication changes

What you can do:

- Refer to dietitian for any concerns with intake, weight loss or new PI
- Monitor intake of food and fluids
 - Know your residents' preferred foods and drinks. Encourage residents to drink every time you provide care; offer a "toast" to encourage fluid intake.
- Assist with feeding through verbal cueing; assisted feeding, providing finger foods, etc.
 - Engage residents with staff during feeding assistance
- Report behavior changes immediately
- Offer snacks and supplements if inadequate meal intake noted. YOU know what your residents like!
- Encourage foods high in:
 - Protein: fish, meat, beans, peanut butter, nuts
 - Vitamins A, C, E, K: Carrots, sweet potatoes, fruits and vegetables, dairy, whole grains

Do what you do best — take great care of your residents...they depend on you.

Simple Strategies for Healthy Skin



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