

Pressure Ulcer Prevention Checklist



- For residents who are at severe risk, try “last up, first down.”**
 - TURN, TURN, TURN every one to two hours as care planned in bed, chair and wheelchair.**
 - Daily skin inspections with moisturizing skin with a.m. and p.m. care.**
 - Reduce moisture—keep skin clean and dry; use moisture-barrier ointments.**
 - Maintain good nutrition and hydration. Offer a sip of water with every resident contact.**
 - Reduce friction and shearing by using assistive and lifting devices.**
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- Use pressure-reducing support surfaces in bed and chair.**
 - Complete a skin assessment on all new admissions using a standardized tool (Braden or Norton scale) within eight hours of admit and weekly for four weeks, then quarterly or with each change of condition.**
 - Implement an interim preventive care plan within 24 hours post-admission—reduce all risks of injury from moisture, immobility, poor nutrition, friction/shear, inactivity and poor health.**
 - Educate staff on pressure ulcer facility preventive practices at time of hire and annually.**
 - Notify dietary staff within 24 hours if resident is at risk of developing a pressure ulcer or is admitted with or acquires a pressure ulcer.**
 - Assess residents for restorative potential and encourage mobility and activity.**
 - Educate residents and their families on self-care measures to prevent pressure ulcer development.**