ALTERNATE UNIVERSES:

Pressure Injury

How HCP Decision-making Affects Patient Health Trajectories and HC Spending



Ms. H Situation: • Ms. H is an otherwise very healthy woman who presents at the emergency department with abdominal distress late in the evening. • She is mobile and lucid but in considerable pain. • After examination by the emergency department doctor she is given pain medication. • The pain medication changes her ability to feel discomfort. · She spends the night in a partial sitting position in a bed in the emergency department because of the abdominal issues, awaiting admission to a • Key Decision Point: As per best practice, she is administered a risk ward. assessment for pressure injury in the ED. Her score indicates she is at • She is transferred the next day to a room, where she is kept in a sitting position and continues to take pain medication. moderate risk. • Key Decision Point: No risk assessment for pressure injury is done at any time. • On day 3 a nurse helping with hygiene discovers a stage 3 pressure injury on H's coccyx. • A plan is implemented for regular repositioning through the night, which she spends in a partial sitting position in a bed in the • A plan is put in place to manage the wound through cleansing and regular dressing changes. emergency department awaiting admission to a ward. H has abdominal surgery on day 4. She is transferred the next day to a room, where she is kept in a sitting position and continues to take pain medication. • Her plan of care includes regular repositioning until her surgery, on • Over the course of the next 14 days H is treated for both the surgical • H is treated for both the surgical wound and pressure injury. day 4, after which her pain subsides and she no longer needs pain wound and pressure injury • The surgical wound heals normally but the pressure injury does not meds. • Surgical wound and pressure injury both heal normally despite the because of infection. • As a result of her new situation, another pressure injury risk added burden to H's system. assessment is carried out. Her new score indicates she is no longer at 2 WEEKS risk and repositioning by staff is no longer required. 2 WEEKS Discharge from hospital · Discharge from hospital • An additional 3 weeks of home care to continue management of the pressure injury • Over the course of the next 14 days H is treated for the surgical • The wound is finally closed by day 35 post-emergency department wound, which heals normally. visit. Nound care costs for pressure injury: 2 WEEKS Dressings: \$XX SSS Nursing time: \$XX Discharge from hospital Wound care costs for pressure injury: Hospital: Dressings: \$XX Wound care costs for pressure injury: Nursing time: \$XX Dressings: \$0; Antibiotics: \$XX nursing time: \$0; Home care: Costs for preventing the pressure injury Dressings: \$XX (for repositioning to prevent PI): \$XX Nursing time: \$XX (\$\\$\\$\\$ Antibiotics: \$XX