Pressure ulcers are a localised injury to the skin and/or underlying tissue usually over a bony prominence, as a result of pressure, or pressure in combination with shear.*

**ASSESS**
During assessment note any signs of tissue damage

**IDENTIFY**
Potential risks of pressure ulcers occurring using Andersen Tool

**DOCUMENT**
Findings and considerations

**REFER**
Report on handover or refer to GP/ District Nurse. Make a Safeguarding referral for any grade 3 or 4 not being treated by a health professional.

---

*European Pressure Ulcer Advisory Panel and National Pressure Ulcer Advisory Panel © ArjoHuntleigh 2014

**Scottish Adapted European Pressure Ulcer Advisory Panel (EPUAP) Grading Tool**

| Grade 1 | Non-blanchable erythema (redness) of intact skin. Discoloration of the skin, warmth, edema, induration or hardness may also be used as indicators, particularly on individuals with darker skin.
| Grade 2 | Partial thickness skin loss involving epidermis, dermis, or both. The ulcer is superficial and presents clinically as an abrasion or blister.
| Grade 3 | Full thickness skin loss involving damage to or necrosis of subcutaneous tissue that may extend down to, but not through underlying fascia.
| Grade 4 | Extensive destruction, tissue necrosis, or damage to muscle, bone, or supporting structures with or without full thickness skin loss.

**Progression of a pressure ulcer**

**The Andersen Score is a recognised tool for identifying risk of pressure ulcers:**

<table>
<thead>
<tr>
<th>Absolute (Score 2)</th>
<th>Relative (Score 1)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unconsciousness</td>
<td>Age &gt;70</td>
</tr>
<tr>
<td>Dehydration</td>
<td>Restrictive mobility</td>
</tr>
<tr>
<td>Paralysis</td>
<td>Incontinence</td>
</tr>
<tr>
<td></td>
<td>Pronounced emaciation</td>
</tr>
<tr>
<td></td>
<td>Redness over bony prominence</td>
</tr>
</tbody>
</table>

If 2 or more scored at risk of pressure ulcer, refer to GP/ District nurses for a tissue viability assessment.

**POINTS TO REMEMBER**

1. Pinch-points - Buckles - Trolley side handles - Arm caught under body-weight
2. Consider padding around head / neck / shoulders if lateral - Minimise time on scoop / board - Consider pain relief - Consider repositioning if patient has an existing pressure ulcer

Developed by the London Ambulance Service NHS Trust and Bucks New University