

The following is a survey of nursing homes regarding the number of patients who are admitted to hospitals and the number returning with bed sores or bed ulcers.

- Survey period for hospital admission: \_\_\_\_\_. If a patient is in the hospital during any of this period, include the patient on the survey.
- No identifying patient information should be placed on the form. Keep a copy of all forms and a cross reference sheet with the data and form numbers for you to re-review the case if it becomes necessary.
- Place all patients from the same hospital on the same form. One hospital per form per.
- List all patients who were transferred from one hospital to another on a separate form.
- Please use the Staging for bed sores as described below.
- List ALL patients admitted to the hospital, even if they did not have pressure sores. We need these patients reported to determine an incidence of occurrence.
- If a patient had no sores, place "0" in the "Number of Sores BEFORE Admission" and the "Number of Sores AFTER Admission" fields.
- For more information contact [www.healthwatchusa.org](http://www.healthwatchusa.org)

"Stage 1"--- An observable, pressure-related alteration of intact skin, whose indicators as compared to an adjacent or opposite area on the body may include changes in one or more of the following parameters:

- Skin temperature (warmth or coolness);
- Tissue consistency (firm or boggy);
- Sensation (pain, itching): and/or
- A defined area of persistent redness in lightly pigmented skin, whereas in darker skin tones, the ulcer may appear with red, blue or purple hues.

"Stage 2"--- Partial thickness skin loss involving epidermis, dermis or both. The ulcer is superficial and presents clinically as an abrasion, blister or shallow crater.

"Stage 3"--- Full thickness skin loss involving damage to, or necrosis of, subcutaneous tissue that may extend down to, but not through, underlying fascia. The ulcer presents clinically as a deep crater with or without undermining of adjacent tissue.

"Stage 4"--- Full thickness skin loss with extensive destruction, tissue necrosis or damage to muscle, bone, or supporting structures (e.g., tendon, joint capsule). Undermining and sinus tracts also may be associated with Stage IV pressure ulcers.