Background: Skin Tears

Skin tears are common in frail hospitalized patients. They can be painful, highly prevalent and can be associated with pain and suffering. As early as 2007, rates of skin tears were found to be as high as 7.5% in older adults. Since then, in a multi-center study, skin tears were observed in 10-25% of post-operative patients. Multiple factors contribute to the development of skin tears and skin wounds, including the use of various medical instruments and medications, changes in skin moisture levels, and skin dehydration. Skin tears are associated with pain and discomfort and can lead to increased medical costs and increased hospitalization time.

Methodology:

1. **Staff Nurse Evaluation of 3 Layer and 5 Layer Foam Dressings**
   - Novel evaluations completed for the first time for the 5 layer bordered foam dressing prior to the 3 layer foam dressing prior to discharge.
   - Staff nurses were asked to rate the 5 layer bordered foam dressing in seven characteristics. The new dressing was rated significantly higher in terms of ease of use, patient comfort, and overall performance.

2. **Staff Nurse Evaluation of 3 Layer and 5 Layer Foam Dressings**
   - The new 5 layer bordered foam dressing was rated significantly higher in terms of ease of use, patient comfort, and overall performance.

3. **Comparison of the Peri-wound Maceration**
   - The 3 layer foam dressing demonstrated a clinically relevant improvement in terms of maceration and wound area.

4. **Comparison of the Peri-wound Maceration**
   - The new 5 layer bordered foam dressing had a significantly lower rate of maceration and wound area.

5. **Comparison of the Peri-wound Maceration**
   - The new 5 layer bordered foam dressing had a significantly lower rate of maceration and wound area.

6. **Comparison of the Peri-wound Maceration**
   - The new 5 layer bordered foam dressing had a significantly lower rate of maceration and wound area.

7. **Comparison of the Peri-wound Maceration**
   - The new 5 layer bordered foam dressing had a significantly lower rate of maceration and wound area.

8. **Comparison of the Peri-wound Maceration**
   - The new 5 layer bordered foam dressing had a significantly lower rate of maceration and wound area.

9. **Comparison of the Peri-wound Maceration**
   - The new 5 layer bordered foam dressing had a significantly lower rate of maceration and wound area.

10. **Comparison of the Peri-wound Maceration**
    - The new 5 layer bordered foam dressing had a significantly lower rate of maceration and wound area.

Discussion:

**Clinical outcomes and wound care in hospitalized patients:**

Clinical outcomes are important for both patients and clinicians. Managing patient symptoms, reducing pain and improving quality of life (QoL) are always specifically required by dressing characteristics. The new dressing was found to be more comfortable, easier to use, and showed significantly lower rates of maceration and wound area.

In today’s cost-driven healthcare environment, clinicians must consider product effectiveness, as well as consider product-related wound complications, cost-effectiveness, patient comfort and dressing-related complications in order to achieve the best possible outcomes.

**Case Study**:

The 5 layer bordered foam dressing has several improved features over other bordered foam dressings. The dressing allows the physician to stretch to exact size of the wound and can be used to manage a variety of wounds. The dressing is also flexible and can be used on all types of wounds throughout the body. The new dressing was shown to be more comfortable, easier to use, and showed significantly lower rates of maceration and wound area.

**Conclusion**:

The clinical outcomes and extended wear times achieved in this QIP suggest that positive healing results as well as patient satisfaction can be achieved with the use of the new 5 layer bordered foam dressing.

**Limitations**:

Historical data were not available for a control group, and inter-group and intra-group variability were not considered for this study. Additionally, the study was retrospective in nature and may not be applicable to other settings or populations. Future studies are needed to further evaluate the effectiveness of the new dressing in different patient populations.