



Nursing care for critical patient with pressure injury Using TIMERS framework: A case study.

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Background

Pressure injury remains a major health problem among critical patients. This problem is the strongest predictor of increased length of stay, healthcare expenditures, and risk of mortality. Therefore, a patient with pressure injury needs a comprehensive care during in critical period.

A case study of Thai man, 42 years old. He was diagnosed with pneumonia with septic shock with respiratory failure. His underlying diseases were hypertension and alcoholism. Pressure injury was first found in coccyx after hospitalized 3 weeks. Nine days after undergoing the debridement, his wound had moist gangrene and in severe condition. The doctor consulted enterostomal therapy nurse for continuing care. To care with a holistic perspective, the TIMERS framework was utilized to assess the wound healing.

Aims

To describe the nursing care for a critical patient with pressure injury.
To assess the wound healing by using the TIMERS framework.

Results

After caring for 6 months, the pressure injury stage was reduced. The conditions of wound was described as follow:

TIMERS	Results
T : Tissue	Viable tissue was red (granulating) and represented an environment conducive to normal wound healing.
I : Infection/ Inflammation	No sign of infection
M : Moisture imbalance	Exudate amount was dried.
E : Edge of wound	Pressure injury stage 2, wound size was 2*4 cm. PUSH score was 10. Braden score was 23.
R : Repair of tissue and regeneration	Surface area of wound was improved. Wound size was 2*4 cm.
S : Social factors	Family members participated entire process of care.

Discussion

TIMERS ensures that all aspects of wound care delivery are considered. Multidisciplinary team plays a crucial role in caring for critical patients with pressure injury. Holistically, patient and family members should involve in the protocol for caring hard-to-heal wound.

Methods

Design: A case study design was conducted.

Nursing care: A protocol for pressure injury care included wet dressing with applying soak polyhexanide 15 minutes and then cleansing with 0.9% normal saline. Then, silver sulfadiazine cream was applied and closed with moist gauze dressing. This procedure was done two times a day.

Instruments: The TIMERS tool, PUSH tool, and Braden scale

Study outcomes: Wound healing, pressure injury stage, wound size, and patient satisfaction



Picture 1



Picture 2



Picture 3



Picture 4



Picture 5



Picture 6

Conclusion

The use of TIMERS as a comprehensive wound assessment tool in the critical care is applicable framework for patients with pressure injury.