

PHARMACY QI

Practical Tips for Quality Improvement

October 2016

CASE: GLAUCOMA WITH PRESSURE ULCER

M.L. is a 90-year-old woman who has been a resident at your facility for the past two years. She has open-angle glaucoma and limited mobility. Recently she was bed- and wheelchair-bound as a result of bacterial pneumonia. What can you do to reduce her risk of pressure ulcers?



Medical Conditions

- Type 2 diabetes
- Osteoporosis with history of fractures
- Open-angle glaucoma
- Depression
- Mixed urinary incontinence

Medications:

- Metformin, Sitagliptin
- Risedronate, Vitamin D
- Simbrinza®
- Citalopram
- Tolterodine

Diabetes

Poor control → impaired blood flow → increased risk of pressure ulcers

- Metformin, Sitagliptin: Reassess therapy to achieve optimal blood sugar control
- Assess diet and provide nutritional supplementation as needed

Glaucoma

Impaired vision → reduced ambulation → increased risk of pressure ulcers

- Simbrinza: Assess for blurred vision
- If vision impaired, assist resident with ambulating and toileting

Incontinence

Moisture on skin → increased risk of pressure ulcers

- Tolterodine: Assess for effectiveness, consider discontinuation
- Minimize moisture on skin: Establish regular toileting with assistance. Use protective barrier and pads/briefs.

Pain

Fracture-related pain → reduced ambulation → increased risk of pressure ulcers

- Optimize pain management through medication use and proper positioning
- Determine the need for occupational therapist assessment for wheelchair and other seating