



# PRESSURE ULCER PREVENTION

## A SIMPLE GUIDE FOR CARING FOR A PATIENT WITH A PRESSURE ULCER

### 1 RELIEVING PRESSURE

✔ Regularly **reposition the patient** at least every **2 hours during the day and every 4 hours at night**. ✔ If possible, reposition the patient with more than one person assisting. ✔ Use **pressure-relieving mattress, pads, or special cushions**. ✔ Ensure bed linen is **smooth, taut, and free of wrinkles** to prevent unwanted pressure. ✔ Make sure the patient is **not lying on bunched-up bedding** or wearing overly tight clothing. ✔ For wheelchair users, **shift weight every 15 minutes (micro-repositioning – small adjustments, moving limbs, even with help from another person)**.

### 2 SKIN CARE

✔ Keep skin **clean and dry**. ✔ Use **moisturising and protective creams**. ✔ Avoid **harsh soaps and alcohol based products**, which can dry the skin. ✔ Check the skin daily – **if redness appears**, relieve pressure immediately and avoid positioning the patient on that area for some time.

### 3 WOUND CARE

✔ If a **wound has developed**, keep it **clean and covered with a dry sterile dressing** (as first aid, even ironed linen without fibres can be used) **or a sterile pad with colourless disinfectant**. Seek professional help from a general practitioner, wound care clinic, community nurse, and follow professional recommendations.

### 4 NUTRITION AND HYDRATION

✔ Ensure **enough protein, vitamins, and minerals intake**. ✔ Maintain adequate fluid intake to keep skin supple.

### 5 ADEQUATE MOVEMENT

✔ If possible, encourage **exercise or active movement**. ✔ Gentle massage and stretching **can help improve blood circulation**. ✔ Never massage areas where skin damage is present.

### 6 INVOLVING FAMILY AND PROFESSIONALS

✔ Do not hesitate to **ask for help** – community nurses can advise on techniques and care. ✔ Support from relatives is key – the patient should feel **comfortable, safe, and motivated to heal**. ✔ Carers should also **feel supported** so they can provide high-quality care.

#### WHEN TO SEEK HELP?

If redness (red area) does not fade after relieving pressure, or if small skin cracks or ulcers appear, contact health professionals immediately. Early treatment prevents serious complications.

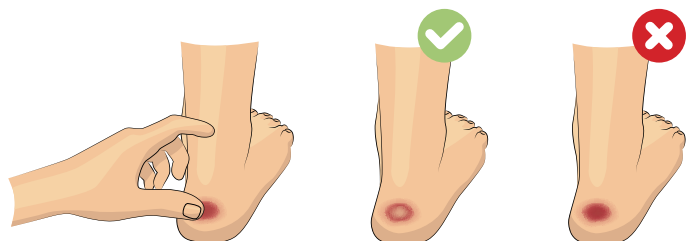


## HOW TO IDENTIFY CATEGORY I PRESSURE ULCER

After a gentle application of pressure to red area:

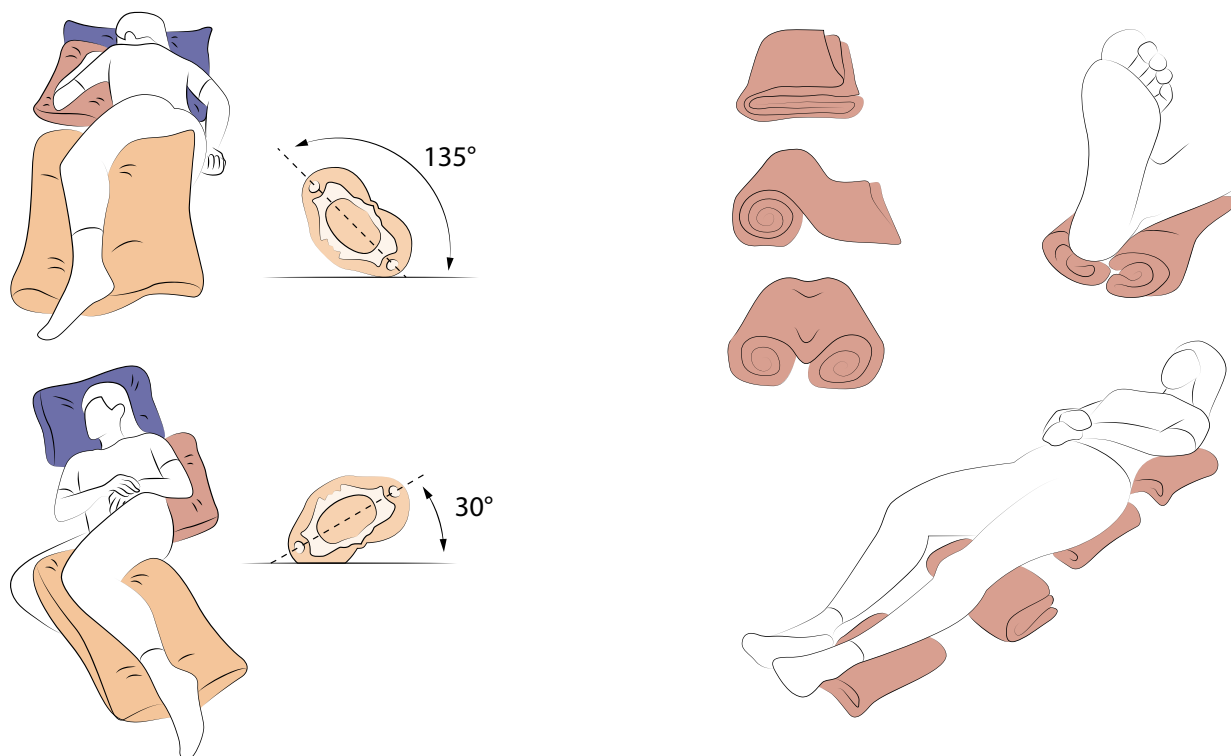
✔ If it turns **white**, it is **not yet a pressure ulcer**,

✘ If it **stays red** after gentle pressure, it is a **pressure ulcer** – seek medical help.



To identify a Category I pressure ulcer, specialists use a special transparent plastic disc. This disc helps determine whether a reddened area of skin may be a pressure ulcer. The disc is gently placed on the reddened skin, and the colour is observed to see if it fades. If the redness does not disappear even with gentle pressure, it may indicate that the area is already a pressure ulcer.

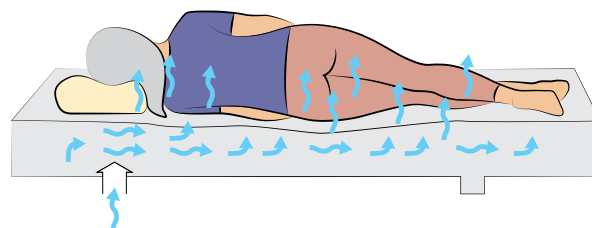
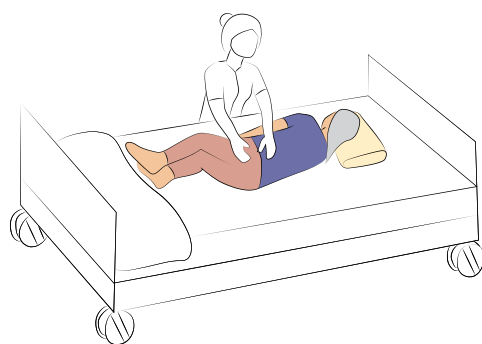
## REPOSITIONING USING PILLOWS AND TOWELS



## BED AND MATTRESS

The bed should have a quality, breathable, pressure-relieving mattress (memory foam is best; inflatable active mattresses are not always needed). The bed base should allow mattress ventilation.

Ideally, the bed should be at the carer's waist height to ease patient handling (best is an adjustable bed).



### NOTE

Pressure ulcers can be also **unavoidable (non-preventable)**. These pressure ulcers occur in patients with very severe health conditions where even the best prevention cannot stop their development (e.g., terminal cancer, severe organ failure).

### References:

Pokorná et al., 2021. Clinical Practice Guideline – Prevention and Treatment of Pressure Ulcers.

Available at: [kdp.uzis.cz/res/guideline/33-dekubity-final.pdf](http://kdp.uzis.cz/res/guideline/33-dekubity-final.pdf)

[www.zahojime.cz](http://www.zahojime.cz)

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**L E R A M**  
PHARMACEUTICALS

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