



Practice Update

The Center for Professional Development and Practice 

Skin Care Guide for Non-Invasive Oxygen Delivery Systems

February 2012

Situation: Pressure Ulcers stage II and III on nasal area due to use of SIPAP in NICU cross campus.

Background: Patients placed on SIPAP are at higher risk to develop pressure ulcers. This is due to incorrect use of nasal prongs due to sizing, fitting them, not using skin dressing, and not doing proper skin integrity assessment.

Assessment: Emphasis on assessing if size is correct, consult Respiratory Care for the initial set up. Keep the prongs on the patient curving towards the nares, even in prone position. Listen to breath sounds to hear flow instead of tightening prongs. The use of a hydrocolloid on the patient's skin is necessary as well as assessing Q 4 hours to see if the new dressing is appropriate. Document skin Integrity in the patient's plan of care.

Recommendation: Follow the Non-invasive Oxygen Delivery System Skin Care Guide:

1. Apply a hydrocolloid (Neoprep) or other appropriate dressing (Mepilex) under devices including nasal cannulas. These dressings can serve to aid in healing and also protect from skin breakdown.
2. Change hydrocolloid dressing when it becomes loose or white.
3. Inspect nasal septum, nares, behind ears and neck, including any areas that the device or nasal cannula is in contact with for breakdown every 4 hours. (Note in plan of care.)
4. Suction mouth and nose prn; use normal saline to loosen secretions.
5. Check for abdominal distention every 2-4 hours.
6. Keep circuit free of condensation by emptying water from circuit every 2-4 hours minimally and prior to repositioning. To help prevent condensation from occurring, tubing should be lower than head of patient.
7. Change position at least every 4 hours and prn.
8. When using nasal cannula, try to remove nasal cannula from nares for 30 minutes with cares and every 4-6 hours as patient tolerates.
9. Avoid tightening of cannula and prongs excessively. Check fit of devices and take into account width of septum. **Remember to consult Respiratory Care for initial set up.**
10. Remove tubing set-up from head minimally every 8 hours to assess for pressure areas and molding as patient tolerates.
11. Documentation:
 - Skin assessment findings
 - Develop plan of care related to skin integrity care.

Consult Sandra Oehlke, WOCN, RN for any skin integrity concerns.

<http://java01.childrensmn.org/finddoctor/SpecialistDetail.do?docid=179390654>



Additional References:

- Pediatric Fixed Medical Device Dressing Selection Guide:
<http://khan.childrensmn.org/Web/CPDP/Skin/197213.pdf>
- Children's Dressing Selection Guide:
<http://khan.childrensmn.org/Web/CPDP/Skin/198592.pdf>

