

Documentation Tip: Pressure Ulcer/Injury

Documenting the *presence, location, and staging* of a patient's wounds/skin ulcers accurately supports the intensity of your service, severity of illness, risk of mortality, and length of stay.

- Document the presence and location of the pressure ulcer:
 - Without documentation of the presence and location from a treating physician, the wound/skin ulcer cannot be captured and reported.

- Document the stage for decubitus/pressure ulcers/Injury:
 - **the wound stage can be captured from nursing or WOCN documentation, if present
 - Deep tissue injury
 - Stage I
 - Stage II
 - Stage III
 - Stage IV

- Indicate if gangrene is present, if present specify:
 - Dry (ischemic)
 - Wet (infectious)

