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11250 Roger Bacon Drive,

Suite 8

Reston, VA 20190-5202

(703) 464-4849

*President's Message:**By Courtney H. Lyder, ND, GNP, FAAN*

As my one year term is nearing completion, I write my last message with mixed feelings. In 2003, I will complete my last year on the board of directors and I am delighted to return my attention and energies to the public policy committee. However, I will miss greatly the broader perspective of providing leadership to the overall organization. Given the composition of the board of directors, I am very confident that the next President will provide quality leadership that the NPUAP needs to maintain its national prominence.

In reviewing this year's past accomplishments, I am most pleased with the level of positive energy and enthusiasm that we have been able to maintain. This year the education committee has developed two new conferences (Documentation and Best Practices in Pressure Ulcer). The reviews for our Documentation conference held in Florida (October 2002) was well received. We were also able to present three Avoidable versus Unavoidable conferences in 2002.

The Research Committee continues to be productive as they move forward with several task forces. The Support Surface Initiative (Co-Chaired by Drs. Stephen Sprigle and David Brienza). The work of this very important initiative should come to fruition in 2003. This monumental task force will have significant public policy implications for the support surface community. The research committee also made great progress in defining deep tissue injury compared to Stage I pressure ulcers. The Deep Tissue Injury Task Force findings potentially will modify our current understanding and definition of Stage I pressure ulcers. A new task

force was also developed this year (Chaired by Mary Ellen Posthauer) to examine the role of nutrition in pressure ulcer prevention and management. The results of the task force will lead to our first position statement regarding the role of nutrition in pressure ulcers.

The Public Policy Committee also remained active this year. Most recently, this committee worked (upon request of the U.S. Centers for Medicare and Medicaid Services {CMS}) on rewriting Section M of the Minimum Data Set (MDS). This is the federal document used by all 17,000 nursing homes in the U.S. to screen patients. Clearly, the relationship between CMS and the NPUAP continues to be very strong.

I would like to take this opportunity to thank the Executive Committee (Drs. Bates-Jensen, Berlowitz, Bennett, and Sharon Baranoski) for providing much support during my tenure as President. Moreover, I would like to thank my Mission Committee Co-Chairs (Drs. Baharestani, Black, Brienza, Sprigle and Xakellis). I would also be remiss if I did not acknowledge the incredible work of the board members, CAC members and CO members. Collectively, you have all made this a year that I will never forget!

My heart is full, but my spirit is lifted when I think about all of the people that are a part, or have been a part of this incredible organization. I am honored to be one of the group and I look forward to being an active "working" board member for one more year and then an alumnus.

Here's wishing all of you a wonderful holiday season and a prosperous New Year!

Warm Regards 🍀

# S3I Update

By Mary Jo Geyer, PhD, PT, CWS

The third working group meeting of NPUAP's Support Surface Standards Initiative (S3I) was held on October 28<sup>th</sup>, 2002 in Atlanta Georgia. Approximately 50 people attended the daylong meeting that was held in conjunction with Medtrade at the Georgia World Convention Center. As in the second meeting held in Las Vegas, a number of first time participants attended (approximately 25%) along with the committed core from each of the three established working groups. The initiative has received ongoing publicity and the

group for breakout sessions, Dr. Sprigle introduced the Chairs and Vice-Chairs of the working groups, and summarized their general goals and asked for news and updates. Dr. Alastair McLeod reported on the European Pressure Ulcer Advisory Panel's (EPUAP) efforts to produce guidelines for support surfaces and reaffirmed their support for S3I. Discussion ensued regarding the use of the term "guidelines" in lieu of "standards" and the need for a brief mission statement to prevent confusion for future participants. Dr. Sprigle also announced NPUAP upcoming events including seminars and the 8<sup>th</sup> National Conference in New Orleans, February 21-22, 2003.



Each working group devoted the majority of the day to their specific agendas then the entire group reconvened to report on their progress at 4

interest expressed by clinician's, researchers, manufacturers and public policy stakeholders has increased accordingly. As originally conceived by the NPUAP Research Committee, S3I was projected as a three-year project culminating in the development of uniform terminology, test methods and reporting standards for support surfaces. These voluntary standards will provide an objective means for evaluating and comparing support surface performance characteristics.

The agenda for the October 28<sup>th</sup> meeting included a general session in the morning involving all of the participants. Dr. Stephen Sprigle, S3I Chair, presented an update of the process including key organizational features and goals, ISO application procedures, a humorous side-comment on "how to kill the process", a report on the budget (\$55K in revenue to date), participation levels (over 250 participants on the active list) and acknowledgement of sponsors. Dr. Mary Jo Geyer, S3I Funding Chair reported on funding efforts and appealed for continued support and assistance with identifying innovative funding sources. Prior to dismissing the

PM. An overview of each group's report follows. Detailed working group minutes and agenda items are available on the website at <http://www.npuap.org/s3i.htm>. The next working group meeting will be held in Las Vegas, NV in conjunction with the 16<sup>th</sup> Annual Symposium on Advanced Wound Care. *Date to be announced.*

## Terms & Definitions Working Group:

Abbey Daniels, Chair

Margaret Goldberg, Vice-Chair

The T&D working group had previously reviewed the scientific literature, marketing publications, clinical practice guidelines, government publications and other sources to compile a list of terms related to support surfaces. The list had been consolidated at previous meetings and specific terms were then assigned to group task leaders for developing evidence-based "suggested definitions". The task leaders presented their definitions and the group voted to approve, reject or table the definition for further review. Consensus was reached on a number of terms and definitions. Some terms were eliminated

from the lexicon. The group is cognizant of the overlap with the Tissue Integrity Group (TIG) and identified a number of terms that will require more specific engineering definitions in the future. Synonymous terms relating to “active” or “passive” support surfaces received considerable discussion and a broader descriptive category was suggested for a number of terms based on the method of pressure distribution employed by the device. The terms and definitions will be presented to the entire group for comment and refinement. Work continues on defining specific terms and identifying additional terms before the next meeting.

### **Lifespan and Usability Working Group:**

*Kathleen Baldwin, Chair*

*Lydia Biggie, Vice-Chair*

This group will specify test methods to assess whether support surface systems continue to perform as intended or designed. It will also recommend disclosure and labeling requirements. The group had been conducting an extensive search for existing standards related to support surface performance characteristics as identified previously. This meeting was devoted to reviewing those existing standards, determining which standards were applicable to support surfaces and identifying those areas needing additional test methods and standards. Searches conducted using the term “life expectancy” resulted in few ‘hits’ but many articles were found using the term “warranty”. The group clarified the distinction between the two terms and the need to focus on “life expectancy” characteristics. An attorney attending this group meeting for the first time provided a valuable perspective of legal issues related to the use of these terms. Various standards from state governments, the military, FDA, and Underwriters Laboratory were reviewed in relation to flammability, fatigue testing, and electrical safety. Specific issues relating to ease of use and reliability in terms of device design and internal pressure measurements were discussed. The group targeted the areas requiring test methods and/or additional standards and assigned task leaders to find additional information pertaining to these items. This group also overlaps with the TIG and will collaborate on future test method development.

### **Tissue Integrity Working Group:**

*David Brienza, Chair*

*Dave Mc Causland, Vice-Chair*

This group has been working on the devel-

opment of test methods to objectively measure a variety of support surface performance characteristics related to clinical outcomes. The group has benefited from the participation of a number of researchers and engineers who have been, or are actively involved in, the standards development process for wheelchair seat cushions. This group previously identified a number of tasks and assigned a leader to each task. An update, discussion, report on related test method development and identification of next steps were considered for each of the following test development tasks:

- ❑ Alternating-pressure devices
- ❑ Temperature and moisture (with heat and water vapor transmission rates established as unique work items)
- ❑ Friction
- ❑ Shear
- ❑ Resistance to envelopment
- ❑ Interface pressure, spatial pressure gradient and contact area
- ❑ Mediating and intervening variables with potential to affect measurements
- ❑ Relationship between intrinsic and extrinsic risk factors
- ❑ Informative annex/preamble
- ❑ Hospital bed safety workgroup

Dr. Steven Reger presented on the measurement of the microclimate changes occurring with the use of low air-loss support surfaces. Dr. Charlie Lauchenbruch discussed his work on standardized indenters that led to a discussion of tissue distortion, vertical shear and other relevant measurements. Dr. Alastair McLeod presented an EPUAP report on pressure evaluation using manikins concluding that full-body indenters (manikins) are preferred. Dr. Eric Flam volunteered to lead the task of searching for existing indenters and correlating their use with the group’s needs. Dr. Lauchenbruch presented the results of a number of laboratory tests performed to determine shear forces and made recommendation for indenter development, standard indices, a reference surface and other methods based on his results. Dr. Stephen Sprigle presented a test method using a rigid indenter-fitted with custom sensors to determine envelopment via the ratio of pressures at two locations on the indenter.

The success of the initiative depends on active participation via the listserv or attendance at the working group meetings. If you are interested in participating in S3I, please complete and submit the on-line form available on the website or contact Laura Markusson at [s3i@npupap.org](mailto:s3i@npupap.org). 🍷



# Deep Tissue Injury Task Force

By Joyce Black, RN, Ph.D.

Michael Ankrom, MD, an Assistant Professor of Medicine in the Division of Geriatric Medicine at the Johns Hopkins University School of Medicine, has been recruited to assist the Deep Tissue Injury Task Force in its work. Dr. Ankrom will lead the effort to review the medical literature with respect to how various staging systems and experts describe this entity which the NPUAP is investigating. The medical literature review will concentrate on a critical analysis of review articles written by leaders in the pressure ulcer field in recent decades, as well as on a careful consideration of historical manuscripts known to pressure ulcer experts, e.g., Sir James Paget's "Clinical Lecture on Bed Sores" from 1873. Newsletter readers are encouraged to submit to the NPUAP any journal articles that might be pertinent to the work of this task force.

Also related to the work of the task force, on the afternoon of Sunday, September 22, 2002, Joyce Black, PhD, RN, and Richard Bennett, MD, task force co-chairs, spoke to almost 200 individuals at the 17<sup>th</sup> Annual Clinical Symposium on Advances in Skin and Wound Care in Dallas, Texas. The title of their talk was, "Deep Tissue Injury: A New Classification for Pressure Ulcers." The lecture included photographs and slides from a number of individuals who presented with bruised or erythematous-purplish lesions over bony prominences and ultimately developed full-thickness Stage III-IV pressure ulcers. The talk also included an historic overview of the issue of pressure ulcer staging, the assumed natural history of deep tissue injury, as well as a discussion of patient risk factors, and nurse and physician roles in documentation and treatment for this entity. 🍷

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## Notes From NPUAP

By Robin Turner, Executive Director

As we close the 2002 year, NPUAP has been very busy with avoidable meetings, our new discerning documentation initiative, Panel meetings, on-going product sales, and marketing NPUAP through exhibits at various clinical symposiums. Our Panel Meeting in Las Vegas, January 9 and 10<sup>th</sup> marks the start of another busy year for the NPUAP. Check the members only section of the website for more details.

### *8<sup>th</sup> National Conference Slated for The Big Easy:*

A Pressure Ulcer Report Card – Education, Public Policy, and Research

Mark your calendar now for the February 21-22, 2003, NPUAP National Conference at the Hotel Inter-Continental. **Exhibitor Prospectus** were mailed and also posted on the website. A registration brochure is forthcoming, so be sure to check the web site regularly for updates. A "Best Practice" meeting has been added to the conference format this year, which will be held at the Hotel Inter-Continental on February 20.

### *Avoidable / Unavoidable One Day Meeting Update*

Interested in co-sponsoring a 2003 Avoidable/Unavoidable meeting? We are always looking for organizations/institutes to present current data on the prevalence and incidence of pressure ulcers. Please review the conference objectives on the NPUAP website; *Avoidable vs. Unavoidable Pressure Ulcers: What is the Evidence?* Contact the NPUAP office for co-sponsoring details.

### *A side note:*

NPUAP's National Office will be relocating as of December 16, 2002. The new mailing address for NPUAP will be: *12100 Sunset Hills Road, Suite 130, Reston, VA 20190* Phone and email addresses will remain the same.

Please feel free to contact me directly at (703) 234-4110 or email [rturner@drohanmgmt.com](mailto:rturner@drohanmgmt.com) or my assistant, Laura Markusson at (703) 234-4106 or email [lmarkusson@drohanmgmt.com](mailto:lmarkusson@drohanmgmt.com).

# Newest Elected Members to the Board

By Courtney H. Lyder, ND, GNP, FAAN

The NPUAP is pleased to welcome Catherine Ratliff, PhD, GNP, CWOCN, CS and Mary Jo Geyer, PhD, PT, CWS, CLT to the Board.

Catherine Ratliff, PhD, GNP, CWOCN, CS is a clinician D at the University of Virginia Health System and Clinical Assistant Professor at the School of Nursing and the Department of Plastic Surgery. She teaches a graduate level Wound, Ostomy, Continence Nursing Program and Co-directs a wound clinic. She is active in conducting research with plastic surgery. Her interest in pressure ulcers is specifically targeted to the geriatric population and she is currently working on starting a geriatric wound clinic. She brings excellent clinical expertise to the NPUAP.

Dr. Geyer is an Assistant Professor in the Department of Rehabilitation Science and Technology and the Associate Director of the Rehabilitation Research Center on Wheeled Mobility at the University of Pittsburgh. She is certified as both a wound specialist and lymphedema therapist. She also holds an appointment within the McGowan Institute for Regenerative Medicine. She received her bachelor's degree from Slippery Rock University, a second bachelor's degree in physical therapy from the University of Pittsburgh, her master's degree in exercise science from Slippery Rock University and her doctorate degree in rehabilitation science from the University of Pittsburgh. For many years, Dr. Geyer owned and co-directed one of the first outpatient cardiac rehabilitation services in the country. Subsequently, she co-authored three editions of a cardiac rehabilitation text used nationally in physical therapy education programs. Her interest in wound care began while serving as the Director of Rehabilitation Services at Butler Memorial Hospital where she developed new, and expanded existing wound services. She currently provides consulting services to long-term care organizations and private practice physical therapy groups as well as teaches wound and lymphedema management in several physical therapy entry-level doctoral programs. Her publications and research interests include a clinical trial to establish the effectiveness of pressure-reducing seat cushions and investigations of the fundamental biomechanical and physiological responses of the skin and soft tissue to external loading. She also assists in the development and evaluation of innovative support surface technologies and other medical devices used for the diagnosis, prevention and treatment of soft tissue injury. Her interest in support surface research has led to her significant involvement in the development of national and international standards for these devices.

We welcome both our new Board members and we look forward to their contributions to NPUAP's mission. 🍀

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## Public Policy Committee:

By George Xakellis, MD, MBA

The public policy committee has been actively providing input on various regulatory issues regarding pressure ulcers. Most recently, the committee has provided feedback and suggestions regarding the skin section of the MDS 2.0. In addition, the NPUAP anticipates being able to provide public comment on regulations regarding assessment of long-term care facilities for pressure ulcers (TAG 314). 🍀

# 8TH NATIONAL NPUAP CONFERENCE

FEBRUARY 21-22, 2003

*A PRESSURE ULCER REPORT CARD:  
EDUCATION, PUBLIC POLICY, AND RESEARCH*

HOTEL INTER-CONTINENTAL  
NEW ORLEANS, LA

#### CONFERENCE OBJECTIVES:

- Compare and contrast personal and institutional practices to national guidelines
- Describe current evidence based practices for pressure ulcer management
- Develop risk management strategies to reduce risk of regulatory exposure

Where are we with the pressure ulcer problem in America? Hear the standard, grade your facility.  
NPUAP will publish the results.



# NPUAP Thomas Stewart Founders

## AWARD ANNOUNCEMENT



Below is a brief bio of Dr. Stewart, who will be recognized during the 8<sup>th</sup> National NPUAP conference to be held February 21 - 22, 2003 in New Orleans. As the first recipient of the Thomas Stewart Founders Award, Dr. Thomas Stewart is recognized for his contribution to the prevention and/or management of pressure ulcers through leadership in public policy.

Dr. Thomas Stewart comes from a family of 11 children. His father was a Major in the Air Force and his mother hails from the island of Malta. Dr. Stewart's father died when he was eleven and his mother was forced to raise the children alone. He began his illustrious academic career by being expelled from High School twice! After working at menial jobs for a year, Dr. Stewart saw the folly of his ways and returned to school with a new respect for education and discipline.

Dr. Stewart earned his undergraduate degree in 1974 in Chemistry and Biology from Daemen College and published his first paper in Physical Chemistry as a college sophomore. Following his undergraduate studies, Dr. Stewart was awarded predoctoral fellowships in Pharmacology and Experimental Pathology from the State of New York. After attending two years of Medical School, Dr. Stewart earned his Doctorate in Biophysics from the State University of New York at Buffalo in 1980 and is an alumnus of its School of Medicine.

Following his graduate studies, Dr. Stewart was awarded a Postdoctoral Fellowship from the National Institutes of Health to study various aspects of cancer metastases at The Roswell Park Cancer Institute. After a short Cancer Research career, Dr. Stewart joined Gaymar Industries

to design and oversee clinical studies and educational offerings that related to pressure ulcers and thermal physiology. Dr. Stewart also played a key role in the medical aspects of product design.

Dr. Stewart's patient and caregiver advocacy started when he attended an NIH Consensus Conference on Deep Venous Thrombosis in the early 80's and gave him the idea that the clinical practice and over all knowledge base concerning the prevention and treatment of Pressure Ulcers should be subjected to at least the same scrutiny and review as could be provided by an NIH Consensus Conference process. During the 1980's Dr. Stewart organized a faculty of nationally renowned experts in pressure ulcer treatment and prevention and spent a good part of his time speaking at conferences all over the United States with this faculty. From his interactions with this conference faculty, the plea from the conference attendees and his yearning to hold a consensus conference for Pressure ulcer treatment, Dr. Stewart realized that what the country needed was an expert Panel to help sift through the myriad of anecdotal treatments and prevention practices and help determine which could be supported by good clinical science and which should be discarded.

In 1987 Dr. Stewart convinced 15 of the Nation's leading experts to join him and begin the process of raising the prevention and treatment of pressure ulcers to an evidence based practice. This was the founding of the National Pressure Ulcer Advisory Panel. The Panel immediately published the tenets of pressure ulcer prevention and treatment, lobbied Congress and succeeded in getting language about pressure ulcers written in to the Budget Reconciliation Act, lobbied the National Science Foundation to have pressure ulcers earmarked as a national health problem to be solved, and lobbied the National Institutes of Health to put pressure ulcers on the schedule for consensus development conference. At the same time the Advisory Panel reached out to all other Organizations that were dedicated to preventing and treating pressure ulcers and asked them to collaborate with the NPUAP to help bring attention to and guidelines for the best practices. From its inception the NPUAP

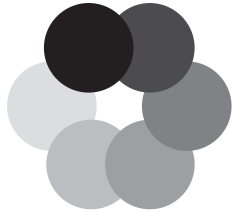
was envisioned as a small panel and not a membership organization. This was so that the Panel would never compete with other organizations and truly act as a lead collaborating entity. In 1989, the first Consensus conference on pressure ulcers was held in Washington. Following the 1<sup>st</sup> consensus conference the AHCPR published guidelines for the prevention and treatment of Pressure ulcers. The NPUAP was one of the lead advisors to the AHCPR process. We all now know of the many works and accomplishments of the NPUAP.

Dr. Stewart has spent the last twenty years studying various aspects of pressure ulcer pathophysiology, wound healing, support surface design and measurement, thermophysiology, and nosocomial lesions acquired mysteriously by patients following operating room and hospital stays. During this time Dr. Stewart has continued his patient and caregiver advocacy as an Alumnus to the NPUAP.

Dr. Stewart has always insisted on knowing the world's literature in any field that he studies and firmly believes that knowledge of the literature in great depth helps prepare the mind for further contributions or scholarly pursuit in any selected field. Dr. Stewart has collected and read a library of over 10,000 articles relating to Pressure Ulcers, Wound healing and Thermal Physiology which is maintained in a computerized database for quick reference.

Dr. Thomas P. Stewart is presently Gaymar Industries' President and Chief Operating Officer and is responsible for the day-to-day operations of the Gaymar companies. He continues to hold an adjunct faculty appointment at the S.U.N.Y. at Buffalo, has authored over 30 articles, has authored a book chapter on support surfaces and is an Editorial Board member for the journal WOUNDS. Dr. Stewart continues to be an invited speaker at numerous wound care conferences. Just recently He has been elected to the Board of Trustees of his undergraduate alma mater-Daemen College.

Dr. Stewart and Mrs. Stewart are parents of three children and he continues to find time to earn a black belt in karate and continues play guitar in a classic rock band.



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11250 Roger Bacon Drive, Suite 8  
Reston, Virginia 20190-5202

Phone: (703) 464-4849

Fax: (703) 435-4390

E-mail: [rturner@drohanmgmt.com](mailto:rturner@drohanmgmt.com)  
[www.npuap.org](http://www.npuap.org)

# Pressure Ulcer Report Card: Education, Research, & Public Policy

**February 21-22, 2003**

**New Orleans, LA**

**February 20, 2003**

**“Best Practice”**

*Check the NPUAP website for full brochure information*

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