Is the patient at risk for pressure ulcer development?

**RISK FACTORS:**
- Braden Scale Score of 18 or less, or Braden Scale Score <18 plus a history of pressure ulcer/current pressure ulcer
  - Bed Bound
  - Chair Bound
  - Existing Pressure Injury

Monitor and provide standard best practices/evidence for the prevention and management of pressure ulcers.

Does the patient have a pressure ulcer or wound?

- NO
  - Determine location of PressureAlert sensor based on risk:
    - Sacrum
    - Both Heels
    - Skull
    - Upper Spine
    - Left/Right Elbow, Hip, Ischia

- YES
  - Apply PressureAlert sensor dressing over the existing wound care dressing.
    (Stages, I, II, III, IV, Unstagable, DTI)