

OASIS ITEM
<p>(M1322) Current Number of Stage I Pressure Ulcers: Intact skin with non-blanchable redness of a localized area usually over a bony prominence. The area may be painful, firm, soft, warmer, or cooler as compared to adjacent tissue.</p> <p> <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 or more </p>
ITEM INTENT
Identifies the presence of Stage I pressure ulcers.
TIME POINTS ITEM(S) COMPLETED
Start of care Resumption of care Follow-up Discharge from agency – not to inpatient facility
RESPONSE—SPECIFIC INSTRUCTIONS
<ul style="list-style-type: none"> • NPUAP defines a stage I ulcer as follows: "Intact skin with non-blanchable redness of a localized area usually over a bony prominence. Darkly pigmented skin may not have visible blanching; its color may differ from the surrounding area." • Further description: "The area may be painful, firm, soft, warmer, or cooler as compared to adjacent tissue. Stage I may be difficult to detect in individuals with dark skin tones. May indicate "at risk" persons (a heralding sign of risk)."
DATA SOURCES / RESOURCES
<ul style="list-style-type: none"> • Patient/caregiver interview • Observation • Physical Assessment • See Chapter 5 of this manual for more information regarding NPUAP staging illustrations.