

WHEELCHAIR CUSHION ASSESSMENT FORM - Form DSC035

Pressure relieving cushions will not be provided:

- For use in armchairs or any other form of seating
- For use in a transit wheelchair which is used as an alternative to appropriate armchair provision
- For use in a privately owned wheelchair where it is assessed that the addition of the cushion compromises safety, or where the standard criteria for NHS provision and use of equipment is not met

Pressure relieving cushions are supplied for use in a wheelchair only.

Client Name: NHS No:
 Address: BDSC No:
 Date of birth:
 Post Code: Telephone No:

GP Name & Address:

Name of Referrer:..... Profession:
 Email Address:..... Tel No:
 Address:

Date of referral:
 Signature of Referrer: Date received at BCE:

Required for hospital discharge? YES <input type="checkbox"/> NO <input type="checkbox"/> Date of discharge?..... Where do we send cushion to facilitate discharge? Address.....

The requested cushion is for : NHS wheelchair Private wheelchair
 Model of wheelchair and cushion currently in use (include seat width x depth).....
 Accurate Client Weight:

PRESENT CONDITION OF PRESSURE AREAS: Classified using the International NPUAP EPUAP [2009] Pressure Ulcer

Classification System

Condition of skin <small>(see below)</small>	Please tick condition of wound	Duration of problem	Location (s) <small>e.g. Right Ischial Tuberosity, right central buttock...</small>	Cause (if known) <small>Direct pressure/ Shear/ Friction/ Moisture lesion due to continence body regulation issues/ Poor medical nutritional status</small>	Re-opening of previous wound Or recurring problem
No problem					
Category 1					
Category 2					
Category 3					
Category 4					
Unstageable, depth unknown					
Suspected deep tissue injury, ungradable					

Abbreviated Pressure Ulcer Classification Guide:

No Problem: No redness/bruising/broken skin

Category 1/ Stage 1: Non-blanchable erythema/ redness

Category 2/ Stage 2: Partial thickness skin loss. Partial loss of dermis. Shallow open ulcer with pink wound bed. Serum filled blister (open/ruptured/intact)

Category 3/ Stage 3: Full thickness skin loss. Bone/tendon/muscle is not exposed. Depth may vary dependent on location of wound. Slough may be present.

Category 4/ Stage 4: Full thickness tissue loss. Bone/tendon/muscle is exposed. Slough may be present

Unstageable, depth unknown: Full thickness tissue loss in which the base of the ulcer is not visible due to slough.

Suspected deep tissue injury, ungradable: Purple/Maroon localised area of discoloured skin or blood filled blister.

Diagnosis:.....

Diabetes: Managed Mismanaged Not applicable

OTHER RISKS: e.g. oedema, oxygen dependent, circulation problems, smoker.....

Anti-coagulants in use e.g. Warfarin YES NO

Continence management: (catheter / pads/ fully continent).....

Nutritional status (PEG, weight stable, hydrated)

Does the wheelchair contact this pressure area site?.....

Are other professionals involved due to the above issues, e.g. Dietician, Tissue Viability, Continence Nurse, Physiotherapist, Occupational Therapist (please provide relevant contact details).
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Is the client compliant with suggested treatment and if not please describe?
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PHYSICAL ASSESSMENT

Any relevant asymmetric postures, tonal issues, joint deformities, sensation issues, which you feel are impacting or contributing to the described wound issues.

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TRANSFER METHOD:

Hoisted: Ceiling track Hoist Hoist- manual
Stand: with stand hoist Stand aid/turner standing assisted independent stand
Sideways : with transfer board sideways without aids
Other

Ideal seat to floor height for transfers (if specific height or height range required)?.....

24 Hour Positioning

Within a typical 24 hour period what is the clients routine:
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How long at any one time does the client sit in their wheelchair
.....

How long and how often is the client out of the wheelchair and where are they
.....

What alternative positioning aids are in use and pressure care in use e.g. armchair pressure cushion, mattress. Please identify type.

RISKS IN PRODUCT CHOICE

Are you aware of any risks in clients/carers maintaining the correct orientation and specific monitoring requirements of the cushions? For example if a cushion with posture shaping or an air based cushion were provided?

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OTHER COMMENTS