Introduction
For the high risk frail elderly, the progression of pressure ulcers are likely to happen not only due to their acute health problems, but also from limited mobility and deconditioned stated of health. Prophylactic dressings are being advocated to prevent pressure ulcer formation in some clinical trials and the dressings may also be benefits to maintain a stable microclimate wound environment for healing. Therefore, a project using protective dressings together with a coordinated approach of pressure ulcer management to promote stage 1 and suspected deep tissue injury (SDTI) healing was launched in acute medical wards.

Objectives
The aims of the project are to (1) evaluate the effectiveness of prophylactic dressing in stage I and SDTI pressure ulcers and their potential cost-benefits; (2) staff satisfaction on using prophylactic dressings

Methodology
All patients with stage I or SDTIs were included in all medical 8 wards from December 2014 to February 2015. Firstly, ward nurses identified patients with stage 1 or SDTI pressure ulcers and informed Wound Nurse for recruitment and then protective dressing were applied accordingly. Wound initial assessment, wound progress, wound photography, the recommended prophylactic dressings and regimens were documented during hopsital stay. Finally, satisfaction surveys were completed by the
designated case nurses.

**Result**

Total 14 patients with 28 stage I and 23 SDTI pressure ulcers were recruited from October 2014 to February 2015. All patients were the elderly (mean age 85.5, age range 72 to 95). Norton Score pressure ulcer risk assessment classified those patients as high risk group, their scores ranged from 8 to 13. All patients were bedridden, impaired mobility and all pressure ulcers were found before admission. Their average length of stay was 4.57 (range from 1 day to 25 days). For those stage I pressure ulcers, 10 out of 28 (35.7%) had healing sign and rest of them were static without deterioration. For those 23 SDTI pressure ulcers, 13 out of 23 (56.5%) had healing sign and 1 out of them (4.3%) had deterioration sign and rest of them were static. 3 patients died during their hospital stay. Dressing changing regimens were every 2 to 4 days or weekly. 11 nurses were completed the survey and all agreed prophylactic dressings were useful in pressure ulcer management. Overall, the application of Prophylactic Dressings is likely to demonstrate its effectiveness to promote pressure ulcers healing and its potential cost benefits in pressure ulcer prevention and management in an acute care setting.