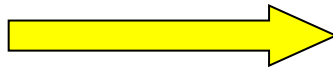


BRADEN Q SCALE

Additional Risk Assessments:

1. Previous pressure injury
2. Patient is palliative



If YES to either, Consider at **High Risk**.

16-28 = At Risk

13-15 = Moderate Risk

10-12 = High Risk

≤9 = Very High Risk

Risk	Score / Description			
FRICION & SHEAR	4 = No Apparent Problem: Able to completely lift patient during a position change; Moves in bed and in chair independently and has sufficient muscle strength to lift up completely during move. Maintains good position in bed or chair at all times.	3 = Potential Problem: Moves feebly or requires minimum assistance. During a move skin probably slides to some extent against sheets, chair, restraints, or other devices. Maintains good positioning in chair or bed most of the time but occasionally slides down.	2 = Problem: Requires moderate to maximum assistance in moving. Complete lifting without sliding against sheets is impossible. Frequently slides down in bed or chair, requiring frequent repositioning with maximum assistance.	1 = Significant Problem: Spasticity, contracture, itching or agitation leads to almost constant thrashing and friction.
TISSUE Perfusion and Oxygenation	4 = Excellent: Normotensive, Oxygen saturation >95%; Normal Hemoglobin; & Capillary refill < 2 seconds.	3 = Adequate: Normotensive; Oxygen saturation may be <95% OR hemoglobin may be < 100 OR capillary refill may be > 2 seconds; Serum pH is normal.	2 = Compromised: Normotensive; Oxygen saturation may be <95 % OR hemoglobin may be <100 OR capillary refill may be > 2 seconds; Serum pH is <7.40.	1 = Extremely Compromised: Hypotensive (MAP<50mmHg<40mmHg in a newborn) OR the patient does not physiologically tolerate position changes.
SENSORY PERCEPTION Ability to respond meaningfully to pressure-related discomfort	4 = No Impairment: Responds to verbal commands. Has no sensory deficit, which limits ability to feel or communicate pain or discomfort.	3 = Slightly Limited: Responds to verbal commands, but cannot always communicate discomfort or need to be turned OR has some sensory impairment which limits ability to feel pain or discomfort in 1 or 2 extremities.	2 = Very Limited: Responds only to painful stimuli. Cannot communicate discomfort except by moaning or restlessness OR has sensory impairment which limits the ability to feel pain or discomfort over ½ of body.	1 = Completely Limited: Unresponsive (does not moan, flinch, or grasp) to painful stimuli, due to diminished level of consciousness or sedation OR limited ability to feel pain over most of body surface.
ACTIVITY Degree of physical activity	4 = All patients too young to ambulate OR walks frequently: Walks outside the room at least twice a day and inside room at least q 2 hours during waking hours.	3 = Walks Occasionally: Walks occasionally during day, but for very short distances, with or without assistance. Spends majority of each shift in bed or chair.	2 = Chairfast: Ability to walk severely limited or nonexistent. Cannot bear own weight and/or must be assisted into chair or wheelchair.	1 = Bedfast: Confined to bed
MOBILITY Ability to change and control body position	4 = No limitation: Makes major and frequent changes in position without assistance.	3 = Slightly limited: Makes frequent though slight changes in body or extremity position independently.	2 = Very Limited: Makes occasional slight changes in body or extremity position but unable to completely turn self independently.	1 = Completely immobile: Does not make even slight changes in body or extremity position without assistance.
MOISTURE Degree to which skin is exposed to moisture	4 = Rarely Moist: Skin is usually dry, routine diaper changes, linen only requires changing every 24 hours.	3 = Occasionally Moist: Skin is occasionally moist, requiring linen change every 12 hours.	2 = Very Moist: Skin is often, but not always moist. Linen must be changed at least every 8 hours.	1 = Constantly Moist: Skin is moist almost constantly by perspiration, urine, drainage, etc. Dampness is detected every time patient is moved or turned.
NUTRITION Usual food intake pattern	4 = Excellent: Is on a normal diet providing adequate calories for age. For example: eats/drinks most of every meal/feeding. Never refuses a meal. Usually eats a total of 4 or more servings of meat and dairy products. Occasionally eats between meals. Does not require supplementation.	3 = Adequate: Is on tube feedings or TPN, which provide adequate calories and minerals for age OR eats over half of most meals. Eats a total of 4 servings of protein (meat, dairy products) each day. Occasionally will refuse a meal, but will usually take a supplement if offered.	2 = Inadequate: Is on liquid diet or tube feedings/TPN which provide inadequate calories and minerals for age OR Albumin <3 mg/dl OR rarely eats a complete meal and generally eats only about ½ of any food offered. Protein intake includes only 3 servings of meat or dairy products per day. Occasionally will take a dietary supplement.	1 = Very Poor: NPO and/or maintained on clear liquids, or IVs for more than 5 days OR Albumin 2.5mg/dl OR Never eats a complete meal. Rarely eats more than ½ of any food offered. Protein intake is only 2 servings of meat or dairy products per day. Takes fluids poorly. Does not take a liquid dietary supplement.

Last Review Date: Reviewed November 2016 by Kristine Thibault, Rita Janke and Sarah Bell.

Established: June 2011

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