

## Hospital-acquired Restraint Injuries: Two 'Never Event' for No Good Reason

Mechanical restraints are linked to increased fall-related injuries. Dr. Vigna highlights concerns over bed sores caused by restraints and their poor prognosis.

SANTA BARBARA, CA, UNITED STATES, April 2, 2025 /EINPresswire.com/ -- "Mechanical restraints were associated with continued, and perhaps increased, occurrence of serious fall-related injuries after controlling for other injury risk factors," states Dr. Mary Tinnetti, MD.

Read Dr. Tinnetti's article "Mechanical Restraint Use and Fall-related Injuries among Residents of Skilled Nursing Facilities", published in Annals of Internal Medicine, 1992; 116: 369-374.



Dr. Greg Vigna, malpractice attorney, states, "When restraints are used in a hospital or other medical facility, it must be applied safely. Each patient encounter requires a careful assessment to ensure the restraint is necessary and that the patient is not suffering a restraint associated injury."



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Greg Vigna, MD

The National Quality Forum considers the following 'Never Events':

"Any Stage III, Stage IV, and unstageable pressure ulcer acquired after admission/presentation to a healthcare setting... Patient death or serious injury associated with the use of physical restraints... while being cared for in a healthcare setting..."

National Quality Forum, List of Serious Reportable Events: <a href="https://www.qualityforum.org/Topics/SREs/List">https://www.qualityforum.org/Topics/SREs/List</a> of SREs.as <a href="px">px</a>

Dr. Vigna also says, "My law firm is looking into serious hospital acquired bed sores that are

caused by restraints. We are concerned about hospital-acquired Stage III and Stage IV injuries being transferred to nursing homes without any path for curative care or reconstructive procedures. We know the prognosis for patients with Stage IV wounds with osteomylitis is poor."

What is the prognosis for a patient with a pelvic Stage IV decubitus ulcer complicated by osteomyelitis?

"Within 1 year, 56 (63%) patients were readmitted, 38 (44%) patients were readmitted due to complications from osteomyelitis, and 15 (17%) died.

Among patients with decubitus-related osteomyelitis who did not undergo myocutaneous flapping, outcomes were generally poor regardless of treatment, and not significantly improved with prolonged antibiotics."

Read Dr. Damioli's article: <a href="https://journals.sagepub.com/doi/full/10.1177/20499361231196664">https://journals.sagepub.com/doi/full/10.1177/20499361231196664</a>

<u>Greg Vigna, MD, JD</u>, is a national malpractice attorney and an expert in wound care. He is available for legal consultation for families and patients who have suffered decubitus ulcers due to poor nursing care at hospitals, nursing homes, or assisted living facilities. The Vigna Law Group along with Ben C. Martin, Esq., of the <u>Ben Martin Law Group</u>, a Dallas, Texas national pharmaceutical injury law firm, jointly prosecute hospital and nursing home neglect cases.

To learn more, visit the <u>Decubitus Ulcer Help Desk</u>.

Read Dr. Vigna's book: <a href="https://vignalawgroup.com/decubitus-ulcers-guide/">https://vignalawgroup.com/decubitus-ulcers-guide/</a>

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