

Management of Deep Tissue Injuries in Patients at Risk for Pressure Injuries

Deep tissue injuries need urgent care, and Clinitron beds offer absolute pressure relief to prevent wounds from worsening in high-risk patients

SANTA BARBARA, CA, UNITED STATES, May 14, 2025 /EINPresswire.com/ -- "Most commonly, deep tissue pressure injuries appear on the skin over the coccyx or sacrum, the buttocks, and the heel," states Ave Preston, RN, CWOCN, University of Pennsylvania Hospital.

<u>Greg Vigna, MD, JD</u>, national pressure injury attorney, Board Certified PM&R,

MARCELLA POSEY, as Administratrix of the Estate of JESSIE POSEY, Decedent,

Plaintiff,

KINDRED HOSPITAL PHILADELPHIA-HAVERTOWN, KINDRED HOSPITALS EAST, LLC d/b/a KINDRED HOSPITAL PHILADELPHIA-HAVERTOWN, CROZER-CHESTER MEDICAL CENTER, CCMC, INC. d/b/a CROZER-CHESTER MEDICAL CENTER, PROSPECT CCMC, LLC d/b/a CROZER-CHESTER MEDICAL CENTER, DANIELLE STEINMETZ, M.D., MONTGOMERY SUBACUTE AND RESPIRATORY CENTER, MONTGOMERY OPERATOR, LLC d/b/a MONTGOMERY SUBACUTE AND RESPIRATORY CENTER, SUBURBAN COMMUNITY HOSPITAL. PRIME HEALTHCARE SERVICES SUBURBAN HOSPITAL, LLC d/b/a SUBURBAN COMMUNITY HOSPITAL, AND HARSHAL PAREKH, M.D.,

COURT OF COMMON PLEAS PHILADELPHIA COUNTY

APRIL TERM, 2025 DOCKET NO.

JURY TRIAL DEMANDED

PROFESSIONAL LIABILITY

MEDICAL

Marcella Posey, as Administratix of the estate of Jessie Posey, Decedent

states, "At the long-term acute care hospital where I practiced, when a patient who was at high risk for pressure injuries with an identified deep tissue injury was admitted, we would have the patient placed on a Clinitron bed for one to five days until the area of concern resolved or declared itself as a full-thickness wound. We did this for the safety of the patient to ensure absolute pressure relief."



Until a deep tissue injury is ruled out, absolute and reliable pressure relief is required, which is best achieved with a Clinitron bed."

Greg Vigna, MD

Dr. Vigna adds, "For deep tissue injuries (DTIs) identified on the sacrum in high-risk patients, our hospital was very careful as to how we managed these patients. Patients would be placed on a Clinitron bed to ensure absolute pressure relief. The area of concern was examined and photographed daily. If the DTI resolved, we would transition the patient to an air mattress, keeping the head of the bed at less than thirty degrees to reduce shear, and

encouraged mobilization as tolerated. While in a wheelchair, patients received assisted pressure relief and reliable repositioning."

Read the recommendations from the nursing staff at the Hospital of the University of

Pennsylvania, published in AJN, May 2017. Vol. 117, No.5: https://pubmed.ncbi.nlm.nih.gov/28448364/

Dr. Vigna continues, "There is a differential diagnosis for DTIs that includes skin changes that may be traumatic, vascular, or dermatologic. The issue is that a DTI may co-exist with these other conditions. Until a DTI is ruled out, absolute and reliable pressure relief is required, which is best achieved with a Clinitron bed. Up to 25% of DTIs progress to be Stage III or Stage IV pressure injuries. This progression may be preventable in some cases with the use of a Clinitron bed, which provides absolute pressure relief."

Dr. Vigna states, "We are reviewing cases in which patients present with areas of concern on pressure-exposed skin that may appear consistent with moisture-related skin changes, only to progress to full-thickness skin injuries. We believe that caregivers in these situations fail to understand that moisture-related skin changes can co-exist with a deep tissue injury. In high-risk patients, the use of a Clinitron bed is warranted until a deep tissue injury can be reliably ruled out."

Dr. Vigna concludes, "We represent those who have suffered serious bedsores caused by hospitals who failed to provide standard of care to prevent these 'Never Events'. In the Posey case, filed in Philadelphia, we allege that one week prior to undergoing a debridement for a Stage IV sacral decubitus ulcer that was caused by Crozer-Chester Medical Center, there was documentation of moisture related skin damage which ultimately became a full-thickness wound. We allege that the deceased, Mr. Posey, required a Clinitron bed to ensure that he was safe from ongoing pressure injury, and failure to do so, which is a substantial deviation from the standard of care, caused injury."

Greg Vigna, MD, JD, 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 <u>Vigna Law Group</u>, 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 that result in bedsores nationwide.

Court Case: Court of Common Pleas, Philadelphia County

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