TO Develop the Schematic Illustration of the MDRPI care: A Evidence-Based Framework

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The most common locations of pressure injury by facial medical device-related pressure injury (MDRPI) include nose bridge, upper ear lobe, bilateral zygomatic processes, occipital bone, forehead, posterior neck and chin (Figure 1). The dilemma in the event of such pressure injury is to relieve the stress and heal the wound, which can result in change to patient’s comfort and reduced acceptance of facial medical device.

**Background**

**Objective**

The aim of this study was to develop a schematic illustration of prevention and care for facial medical device-related pressure injury (MDRPI) on the evidence based framework.

The result of this study was centered on evidence in six aspects of clinical care, including: (1) the type of medical device; (2) the cause of medical device-related pressure injury (MDRPI); (3) locations of high incidence; (4) assess skin condition; (5) the identification of pressure injury; and (6) nursing care mode of facial medical device. That schematic illustration of "medical device-related pressure injury (MDRPI) prevention and care for facial medical device" was developed and provided as standard for clinical nursing staff to improve facial health care and the quality of care to pressure injury due to the device.

**Method**

By literature review of care of medical device-related pressure injury (MDRPI) and integration of nursing measures with evidence, innovative thinking and brainstorming would help to incorporate and develop interventive procedures to satisfy patients’ needs in clinical practice, that could eventually be organized into a schematic illustration to be provided to clinicians in medical environment.

**Results**

The developed schematic illustration of "medical device-related pressure injury (MDRPI) prevention and care for facial medical device" based on the research result was provided to nursing staff as a standard and teaching aid, in order to improve the quality of clinical care, which would be worthy of continuous promotion and implementation in clinical practice.

**Conclusion**

By literature review of care of medical device-related pressure injury (MDRPI) and integration of nursing measures with evidence, innovative thinking and brainstorming would help to incorporate and develop interventive procedures to satisfy patients’ needs in clinical practice, that could eventually be organized into a schematic illustration to be provided to clinicians in medical environment.

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**Figure 2 The schematic illustration**

**Reference**