Objectives
Evaluation of a sub-epidermal moisture (SEM) Scanner to detect non-visible pressure damage, allowing appropriately targeted pressure injury/ulcer (PI/PU) prevention interventions.

Method
- Evaluation on a medical-surgical inpatient ward over a period of 2 months
- 35 patients included in the evaluation
- Heels and sacrum scanned on admission and daily thereafter

Results
- 91% of patients had delta values ≥0.6 indicating inflammatory changes that without intervention may have progressed to a PI/PU
- Zero Hospital-Acquired Pressure Injuries/Ulcers (HAPI/Us) developed during the evaluation in this patient group

Discussion
- The inclusion of SEM Scanner as part of the patient examination informed clinicians about early damage.
- Identification of pressure damage prior to it being visible would allow the most appropriate resource use.

Relationship between Waterlow risk assessment scores and sub-epidermal moisture (SEM) readings

<table>
<thead>
<tr>
<th>Risk scores (Waterlow risk assessment)</th>
<th>At Risk (10-14)</th>
<th>High Risk (15-19)</th>
<th>Very High Risk (&gt;20)</th>
</tr>
</thead>
<tbody>
<tr>
<td>*Percent of patients scanned</td>
<td>52%*</td>
<td>24%*</td>
<td>24%*</td>
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