



## Guidelines for Poster Development

**At least one author must register for the WOCNext 2020 conference by Friday, February 14, 2020.**

### Arranging Content

- It is best to arrange written materials in columns.
- Text should supplement graphics -- the poster is primarily a visual, rather than a written, presentation.
- It is helpful to use arrows to indicate the direction in which the poster is meant to be viewed.
- An introduction should be placed at the upper left and a conclusion at the lower right, both in large type.
- Illustrations will be viewed from a distance of 2 feet or more.
- The sequence of illustrations should be indicated with numbers or letters at least one inch high, preferably in bold font. (Omit "Fig." or "Figure" - it is unnecessary and occupies too much space.)
- Each figure or table should have a heading of one or two lines in large type stating the point of its message.
- Detailed information can be provided in a legend in small type below the figure. These legends should be brief, yet informative.
- Charts, drawings, and illustrations might be similar to those used in making slides, although preferably simpler (avoiding unnecessary details) and more heavily drawn.
- Keep everything as clear as possible. Full sentences are not required. Main points displayed with bullet points is perfectly acceptable.
- Your poster should be self-explanatory so that you are free to supplement and discuss particular points raised by viewers. The poster session offers the perfect opportunity for informal discussion, but this becomes difficult if you are obliged to devote your time to explaining your poster.
- Do NOT include:
  - Any industry logos, trademarks, or other information that promotes or shows the influence of a commercial interest organization (pharma, dressing or device company) on CE paper or ePosters. ***We are unable to offer CE contact hours for posters displaying brand or trade names, company names or logos, links for product websites, etc***
  - Trade names - Use generic or descriptive names only
  - Images or pictures that include products with trade or company names visible
  - Links to industry sites should not be included anywhere on the poster
- DO include:
  - Authors WHO SUBMITTED DISCLOSURE STATEMENTS AT THE TIME OF ABSTRACT SUBMISSION
  - Content that is valid and based on recognized standards
  - Research or recommendations based on evidence and not favoring one product or treatment pathway over another without proper evidence cited for this rationale (including an assessment if the research cited was produced by the company in question versus as a result of peer-reviewed journal)
  - References
  - Financial disclosure information

### ePoster Information

- When you receive your final poster number you will see that it will start with an "e" to let attendees know that your poster is being presented as an ePoster.



- You DO NOT need to bring a physical poster. ePosters are only displayed digitally. The presentation you send will be pre- loaded on the monitors available and identified by number and topic area.
- Attendees will have access to your ePoster a few weeks prior to WOCNext, through the event and for a few weeks post event.
- Below are the requirements for your ePoster submission:
  - Create in Power Point 16:9
  - Power Point, PDF or PNG format
  - Landscape orientation / horizontal
  - File size is 100MB or less
  - Resolution of your ePoster is 1920x1080 or 16:9
  - Font size should not be smaller than 12 point
  - Embed images, charts or graphs within Power Point
  - No videos or links
  - ePoster is 1 page/slide


Your ePoster needs to be emailed to Brooke Passy at [bpassy@wocn.org](mailto:bpassy@wocn.org) no later than **Friday, May 1, 2020**.

Common mistakes made in poster development are highlighted in yellow in the sample below.

## Peri-operative Pressure Ulcer Prevention Initiative

, Kristin Hazellon-Hardy, BSN, RN, WOCN, Karen Riemenschneider, DNP, RN, CWOCN, Jody Scardillo, DNP, RN ANP-BC, RNurse, Lauren Sheehan, BSN, RN, CWOCN, Donna Truland, MSN, RN  
CWOCN- Anytown Medical Center

PURPOSE	METHODS	DISCUSSION
<p>Development of operating room (OR) related pressure injuries and inconsistencies in care were identified by OR RN staff as a quality of care issue. A group of peri-operative nurses and the WOCN's of Anytown Medical Center in Anytown NY convened to evaluate this.</p> <p>The purpose of the initiative was to:</p> <ol style="list-style-type: none"> <li>1. Implement standard nursing assessment &amp; care throughout the peri-operative areas to prevent facility acquired pressure injuries.</li> <li>2. Utilize an interdisciplinary hand-off tool to communicate pertinent data regarding the patient's course in the peri-operative areas.</li> <li>3. Photos below T.S dob 11-11-51. He is s/p TAVR on 11/1/18</li> </ol> 	<p>Literature review was undertaken. Current practice &amp; best practices were identified. A standardized practice for pressure ulcer prevention in the peri-operative areas was developed &amp; implemented as stated below.</p> <p><b>POCURN:</b> Assess patients skin and screen to identify patients who are at risk for skin breakdown based on the following criteria:</p> <ul style="list-style-type: none"> <li>• Surgery anticipated lasting 3 hours or greater</li> <li>• BMI &lt;19 or &gt;40</li> <li>• Previous or current pressure ulcers</li> <li>• Age 70 or greater</li> <li>• Bedbound, chair bound or decreased sensation</li> </ul> <p>The RN will than document skin findings &amp; apply a Mepilex dressing on the sacrum and/or other vulnerable boney areas. Label dressing as preventative with date.</p> <p><b>ORRN:</b> Assess skin and note pre-operative skin concerns/findings. Place foam dressing over vulnerable pressure points for specific surgery &amp; document interventions. Collaborate with Anesthesia provider to complete hand-off tool to trigger appropriate data to share with PACU charge RN.</p> <p><b>PACURN:</b> Note position of patient during procedure, &amp; length of time. Identify pressure points from OR positioning and assess skin to those areas. Peel back foam dressing and assess for any skin breakdown, and then place back on skin. Report skin condition, position &amp; time of OR, prevention plan of care implemented in PACU, and last time repositioned to floor RN accepting patient.</p> <p><b>POST-OP/FLOORRN:</b> Implement prevention plan based on Braden score &amp; skin assessment. Peel back Mepilex dressing every shift, assess skin, &amp; replace until patient is mobile or discharged. Maintain position other than operative position, as much as possible. Consult WOC nursing if new pressure ulcer suspicious for development in perioperative period.</p> 	<p>Approval was obtained from nursing and surgical leadership due to cost implications &amp; practice change. Education was completed in April 2017 &amp; the change was implemented on 5/1/2017. Feedback was positive leading to enhanced communication utilizing a hand off tool that helped standardize &amp; streamline care. Surgical patients are at high risk for pressure ulcer development due to immobility. Enhanced communication and practice changes helped to decrease occurrences.</p>
LITERATURE REVIEW	RESULTS	REFERENCES
<ul style="list-style-type: none"> <li>• Normal BMI patients can develop a pressure after 3 hours on OR table.</li> <li>• Bariatric patients are even higher risk and can occur within 1.5 hours.</li> <li>• Some pressure ulcers do not present themselves (especially deep tissue injuries) until 3-5 days after surgery.</li> </ul>	<p>In the first four months of 2017 prior to implementation, there were 9 documented OR related pressure ulcers. In the four months after implementation, 2 were identified. Data will be collected and evaluated quarterly in the future.</p>	<p>Scott, S. (2015). Progress and Challenges in Perioperative Pressure Ulcer Prevention. <i>Journal of Wound Ostomy Continence Nursing</i>, 42(5), 408-415.</p> <p>Webster, J., Lister, C., Corry, J., Holland, M., Coleman, K., &amp; Marquart, L. (2015). Incidence and Risk Factors for Surgically Acquired Pressure Ulcers. <i>Journal of Wound Ostomy Continence Nursing</i>, 139-144.</p> <p><a href="https://www.mshfvc.ca.us/products-solutions/mepilex-foam-dressings">https://www.mshfvc.ca.us/products-solutions/mepilex-foam-dressings</a></p> <p>Pressure Ulcer Prevention in the OR Recommendations and Guidance, Minnesota Hospital Association. Retrieved at <a href="https://hospitals.org/Portals/6/Documents/prsafety/skin/OR-pressure-ulcer-recommendations.pdf">hospitals.org/Portals/6/Documents/prsafety/skin/OR-pressure-ulcer-recommendations.pdf</a>.</p>



KNOWN FOR OUR EXPERTISE.  
CHOSEN FOR OUR CARE.

### Guidelines for Paper Poster Set-Up

- You will be provided with a freestanding 4 feet x 8 feet poster board on which to display your materials. Do not move the location of your poster. THE POSTER DOES NOT HAVE TO BE THAT SIZE. It's actually better if it's smaller
- Materials should be on thin poster paper, cardboard or fabric -- anything heavier will not stay in position.
- You will be provided with push pins for use in attaching your poster to the board.

- Copies of the poster are the only handouts that will be permitted and should be 8-1/2 inches x 11 inches.
- We will provide a legal-sized pocket for each poster board to place handouts.
- No materials should extend beyond the perimeters of the board (above, below or on the sides).
- Please do not write or paint on the poster boards, or use double-faced tape.
- Do not leave anything on the floor near or under the poster board once it is set up. This is a safety hazard, and any losses are not the responsibility of the society.
- Follow the established schedule for set-up and teardown times. There will be directions in the poster hall. Any losses incurred by late teardown are the responsibility of the poster presenter.
- Projection equipment, videotape recorders, and electrical outlets will not be available in the poster session area.
- Poster Printing – If you are looking for a poster printing service, this year we have partnered with Call4Posters\*. If you are interested in utilizing this service (not required), [please click here](#) to order through Call4Posters and have your poster printed and shipped directly to WOCNext 2020.

*\*Please note that Call4Posters may reach out to you directly to offer their services but you do not have to use them.*

### On Site Schedule

- Poster Set Up is Saturday, June 6<sup>th</sup> from 2:00 pm – 5:00 pm.
- All presenting authors are required to attend the “Meet the Poster Authors” session on Tuesday June 9<sup>th</sup> at 12:15 PM. If you are an e-poster author, you will receive direction regarding time and location that you will need to be present by the poster monitor.
- Poster Pick Up is Wednesday, June 10<sup>th</sup> from 1:00 pm – 2:00 pm - Posters **must** be picked up by **2:00 pm** from the Poster Hall. Posters left after 2:00 pm on Wednesday, June 10<sup>th</sup> will be discarded!

*The WOCN Society is not responsible for missing or discarded posters.*

#### Preliminary Poster Session Dates and Times (subject to change)

Saturday June 6th	2:00 pm - 5:00 pm	Poster Set-Up
Sunday, June 7th	8:30 am - 8:00 pm	Open Poster Viewing
Monday, June 8th	8:30 am - 5:30 pm	Open Poster Viewing
Tuesday, June 9th	8:30 am - 3:00 pm <i>12:30 pm</i>	Open Poster Viewing <i>Meet the Authors (must be present)</i> <b>Awards Presentation</b>
Wednesday, June 10th	8:00 am - 12:00 pm 1:00 pm - 2:00 pm	Open Poster Viewing Poster Pick-Up

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