

# ***THE SACS™ INSTRUMENT***

## **ASSESSING AND CLASSIFYING PERISTOMAL SKIN LESIONS**

**Content Validated<sup>1</sup>**

**Disclaimer.** The information provided herein is intended to assist the clinician in providing patient care based on best practices for ostomy management. The content of this program is not intended as medical advice and does not represent an exhaustive treatment of the subject matter. This program should be used as a guideline and all recommendations must be considered in view of the patient's medical condition and the latest package insert information.

**1.** Beitz J, et al. Content validation of a standardized algorithm for ostomy care Ostomy Wound Manage. 2010 in press.

# PURPOSE & OBJECTIVES



## PURPOSE:

*To provide education and training on how to accurately assess and classify a peristomal skin lesion using the SACS™ instrument.*

## OBJECTIVES:

*After reviewing the training module and passing the scenario test, you will be able to:*

- Assess and classify the peristomal skin condition using the photo-image guide with corresponding lesion definitions (Type of Lesion – L)*
- Identify the location of the lesion on the peristomal plane using the clock-face visual guide (Topographical Location – T)*
- Document a patient's SACS™ classification with the appropriate L (Type of Lesion) and T (Topographical Location) language*

# PROGRAM OUTLINE

*This program is broken into three (3) educational modules and a self-test to assess your understanding:*

**Module 1: Overview**

**Module 2: How to Use the SACS™ Instrument**

**Module 3: Clinical Scenarios**

**Module 4: Self Assessment**

The SACS™ Instrument Ruler is a clinical tool used for assessing peristomal skin lesions. It features a ruler at the top with markings from 0 to 18 cm. Below the ruler, the title "The SACS™ Instrument Ruler" is followed by the subtitle "A content-validated clinical instrument for objective assessment and classification of peristomal skin lesions." The main body of the form is divided into two columns. The left column, titled "Type of Lesion (L)", contains five categories: L1 Hyperemic lesion, L2 Erosive lesion, L3 Ulcerative lesion, L4 Ulcerative lesion, and LX Pre-fistula lesion. Each category is accompanied by a small photograph of the lesion and a brief description. The right column, titled "Topographic/Anatomical Location (T)", contains a diagram of a stoma with labels for T1, T2, T3, T4, T5, T6, T7, T8, T9, T10, T11, T12, T13, T14, T15, T16, T17, T18, T19, T20, T21, T22, T23, T24, T25, T26, T27, T28, T29, T30, T31, T32, T33, T34, T35, T36, T37, T38, T39, T40, T41, T42, T43, T44, T45, T46, T47, T48, T49, T50, T51, T52, T53, T54, T55, T56, T57, T58, T59, T60, T61, T62, T63, T64, T65, T66, T67, T68, T69, T70, T71, T72, T73, T74, T75, T76, T77, T78, T79, T80, T81, T82, T83, T84, T85, T86, T87, T88, T89, T90, T91, T92, T93, T94, T95, T96, T97, T98, T99, T100. Below the main body, there are fields for "Patient's Initials/Name:", "Clinician Name:", "SACS™ Classification (L, T, C)", "Date:", "Time:", and "Location:". At the bottom, there is a small logo for "SACS™" and a copyright notice.

# MODULE 1



**“The peristomal skin should be intact with no evidence of redness, loss of epidermis or sensations such as itchiness, warmth, or pain”**



# WHAT IS A PERISTOMAL SKIN LESION?



- ***ANY compromise in the integrity of the skin around the stoma***
- ***Negative outcome of living with an ostomy<sup>1</sup>***
- ***Wide range of incidence rates:***
  - ***10.2-40% (review of 7 studies)<sup>1</sup>***
  - ***18-55%<sup>2</sup>***
- ***Lack of consensus concerning stomal and peristomal complications does not allow for comparison of prevalence rates<sup>3</sup>***

1 Salvadalena G. Incidence of complications of the stoma and peristomal skin among individuals with colostomy, ileostomy, and urostomy: a systematic review. *J Wound Ostomy Continence Nurs.* 2008;35(6):596-607.

2 Bosio G, Pisani F, Lucibello L, Fonti A, Scrocca A, Morandell C, Anselmi L, Antonini M, Militello G, Mastronicola D, Gasperini S. A proposal for classifying peristomal skin disorders: results of a multicenter observational study. *Ostomy Wound Manage.* 2007;53(9):38-43.

3 Colwell J, Beitz J. Survey of wound ostomy and continence (WOC) nurse clinicians on stomal and peristomal complications: A content validation study. *J Wound Ostomy Continence Nurs.* 2007;34(1):57-69.

# ***WHERE ARE PERISTOMAL SKIN LESIONS LOCATED?***

- Under the hydrocolloid adhesive of the skin barrier
- Under the tape collar of the skin barrier
- Immediately outside the border of the skin barrier





# ***WHAT IS THE SACS™ INSTRUMENT?***

- **An evidence-based instrument developed out of a clinical need**
- **A systematic literature review revealed that no universal system existed to objectively classify peristomal lesions according to type and location**
- **The SACS™ Instrument was developed to help establish a standard language for the assessment and classification of peristomal lesions**
- **A simple, 3-step process easily understood by all health care providers**

**(note: Although the SACS™ Instrument can serve as a guide for all health care providers, it is not intended to replace specialized formal education nor advanced assessment by a Wound Ostomy and Continence Nurse (WOCN) )**

# ***CLINICAL BENEFITS OF THE SACS™ INSTRUMENT***



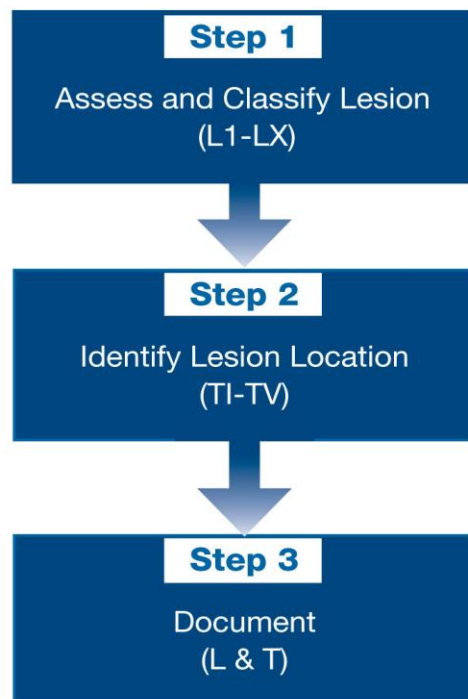
- **Provides operational definitions for the consistent interpretation of peristomal skin lesions**
- **A content validated measurement instrument to classify lesion type and location (CVI=0.94 out of 1)<sup>1</sup>**
- **An objective classification system to document the incidence of peristomal skin lesions**



# MODULE 2

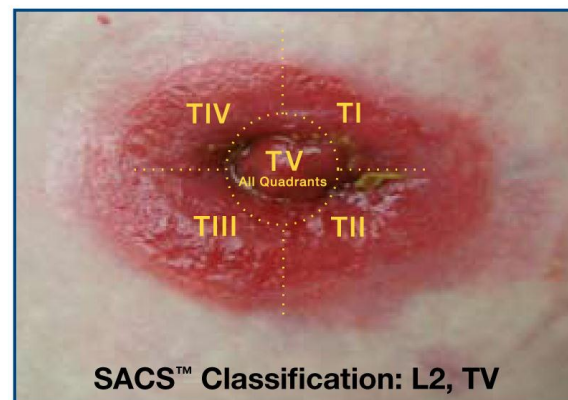


## SACS™ Instrument At-A-Glance



## How to Use The SACS™ Instrument

### SACS™ Classification Examples



# ***PERISTOMAL SKIN LESION DEFINITIONS***

- **Progressive dependent upon the depth of skin involved**

**L1**

## **Hyperemic Lesion**

Peristomal redness  
with intact skin



**L2**

## **Erosive Lesion**

Open lesion not extending  
into subcutaneous tissue;  
partial-thickness skin loss



# PERISTOMAL SKIN LESION DEFINITIONS

- Only difference between L3 & L4 is the presence of necrotic, non-viable tissue

**L3**

## Ulcerative Lesion

Open lesion extending into subcutaneous tissue and below; full-thickness skin loss



**L4**

## Ulcerative Lesion

Full-thickness skin loss with non-viable, dead tissue (necrotic, fibrinous)



# ***PERISTOMAL SKIN LESION DEFINITIONS***

- **LX is proliferative, or a “build-up” rather than a tissue destruction by erosion**

**LX**

**Proliferative Lesion**

Abnormal growths present  
(ie, hyperplasia, granulomas,  
neoplasms)



# HOW TO ASSESS A PERISTOMAL LESION USING THE SACS™ INSTRUMENT

**TI**

Left Upper Peristomal Quadrant (12 to 3 o'clock)

**TII**

Left Lower Peristomal Quadrant (3 to 6 o'clock)

**TIII**

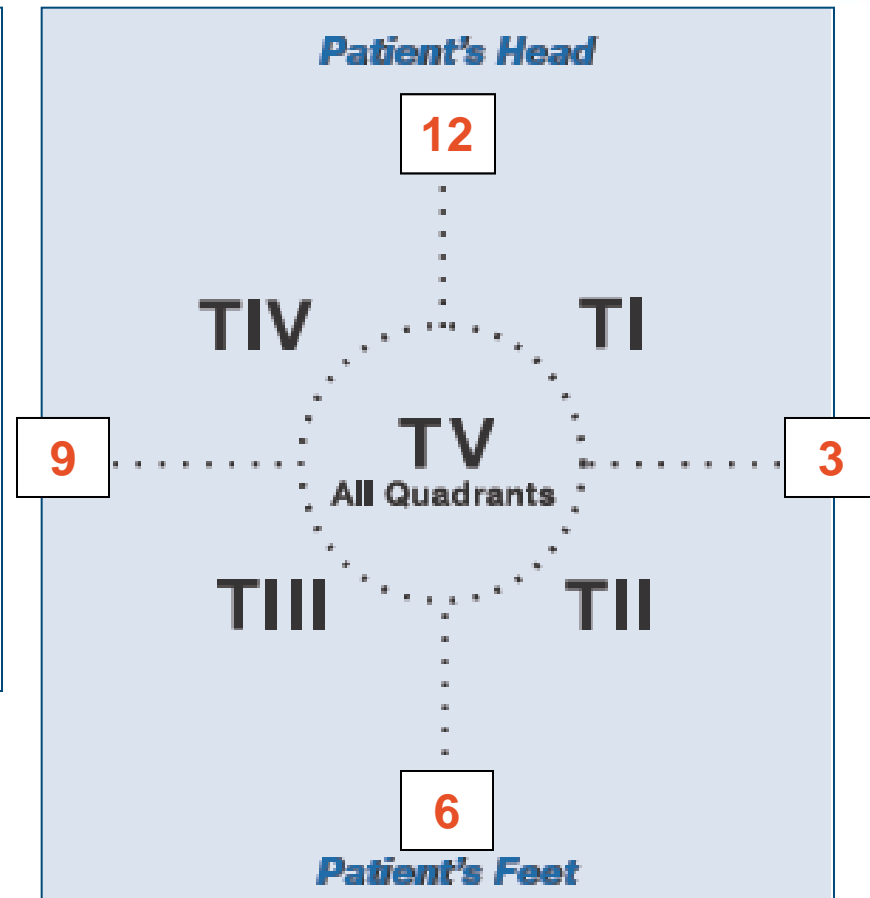
Right Lower Peristomal Quadrant (6 to 9 o'clock)

**TIV**

Right Upper Peristomal Quadrant (9 to 12 o'clock)

**TV**

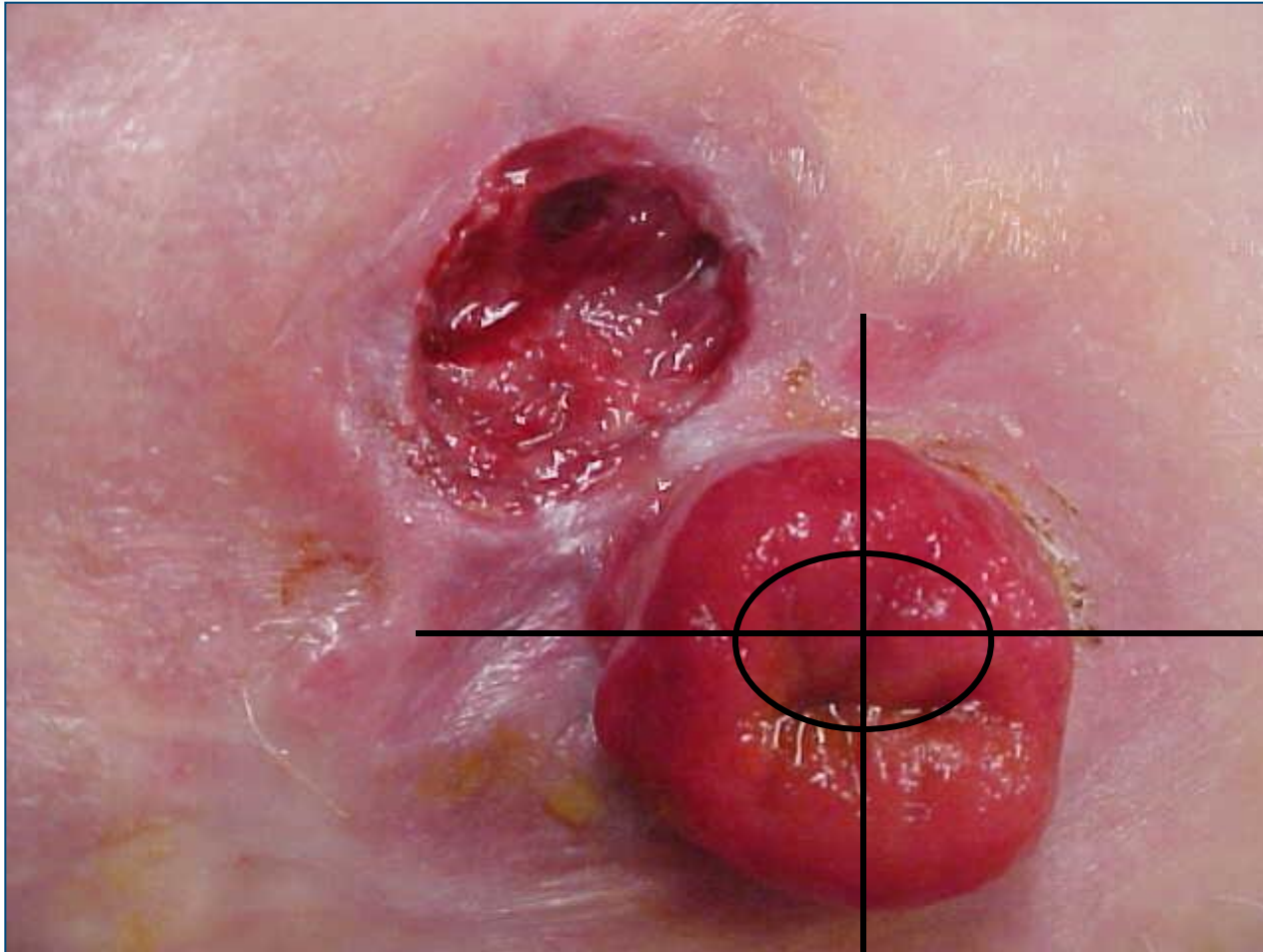
All Peristomal Quadrants



- Stoma quadrants, not anatomical quadrants
- Clock-face orientation



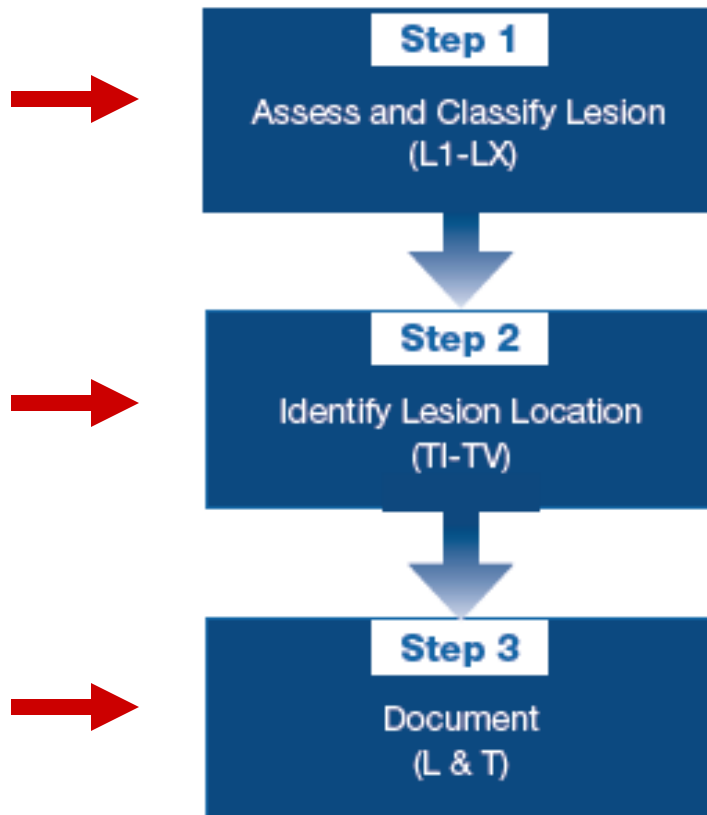
# ***TOPOGRAPHICAL LOCATION***



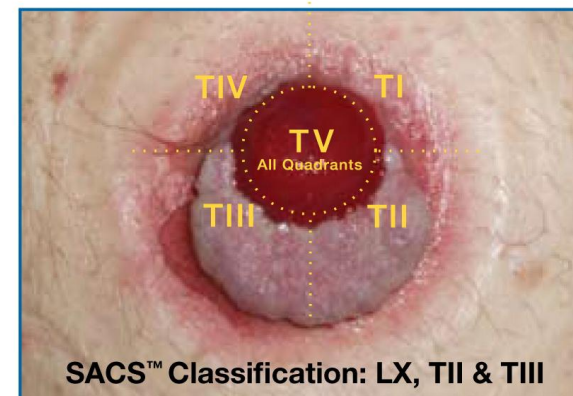
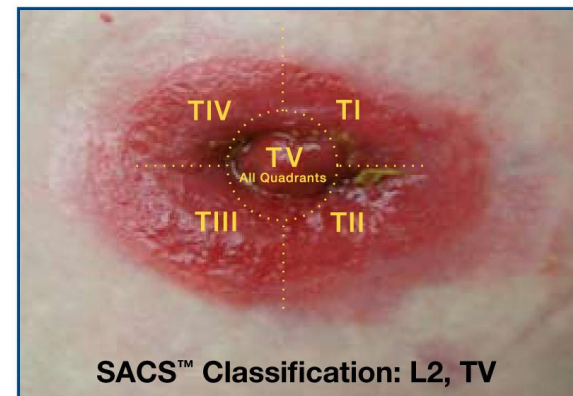


# THREE SIMPLE STEPS

## SACS™ Instrument At-A-Glance



## SACS™ Classification Examples



# Implementation Materials for your Practice

Brochure

includes a Post-it Note Tablet  
Place on Patient Chart

THE SACS™ INSTRUMENT  
A clinical instrument for objective assessment and classification of peristomal skin lesions.  
Wall Chart

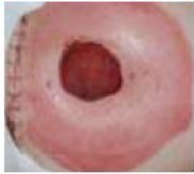




**THE SACS™ INSTRUMENT**  
Assessing and Classifying a Peristomal Skin Lesion

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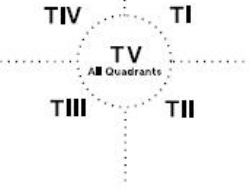
**Teaching Guide**

**THE SACS™ Instrument Ruler**  
A content-validated clinical instrument for objective assessment and classification of peristomal skin lesions.<sup>1</sup>

**Type of Lesion (L)**

L1	L2	L3	L4	LX
				
<b>L1</b> <b>Hyperemic lesion</b> Peristomal skin reddening with intact skin	<b>L2</b> <b>Erosive lesion</b> Open lesion not extending into subcutaneous tissue; partial-thickness skin loss	<b>L3</b> <b>Ulcerative lesion</b> Open lesion extending into subcutaneous tissue and below; full-thickness skin loss	<b>L4</b> <b>Ulcerative lesion</b> Full-thickness skin loss with non-viable, dead tissue (necrotic, fibrinous)	<b>LX</b> <b>Proliferative lesion</b> Abnormal growths present (ie, hyperplasia, granulomas, neoplasms)

**Topographical Location (T)**



**ConvaTec**

Patient #/Initials/Name: \_\_\_\_\_ Clinician Name: \_\_\_\_\_

SACS™ Classification (L, T): \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_ Location: \_\_\_\_\_

<sup>1</sup> Belz J, et al. Content validation of a standardized algorithm for ostomy care Ostomy Wound Manage. 2010 in press. Instrument translated and adapted for the U.S. This instrument has received the endorsement of the Italian ET Association, the AIGOS.

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**SACS™ Classification Example**

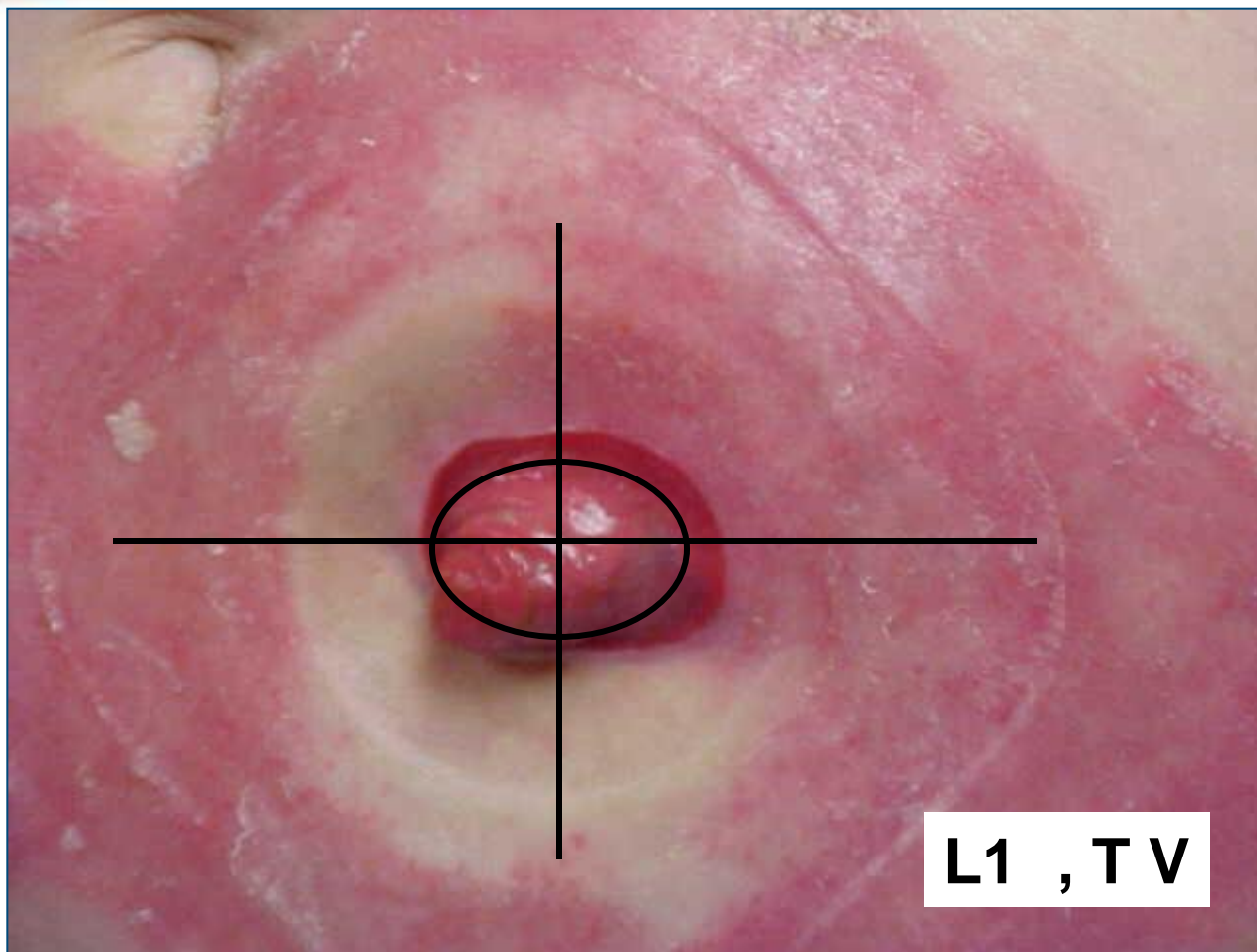
<sup>1</sup> Belz J, et al. Content validation of a standardized algorithm for ostomy care Ostomy Wound Manage. 2010 in press. SACS is a trademark of ConvaTec Inc. ©2010 ConvaTec Inc. AP-009684-US

## ***MODULE 3***



**The following two examples were designed as practice exercises. An image of a peristomal lesion will appear on the screen and the program will pause. When you have completed observing the lesion and have classified it according to the SACS™ Instrument, the answer will be provided.**

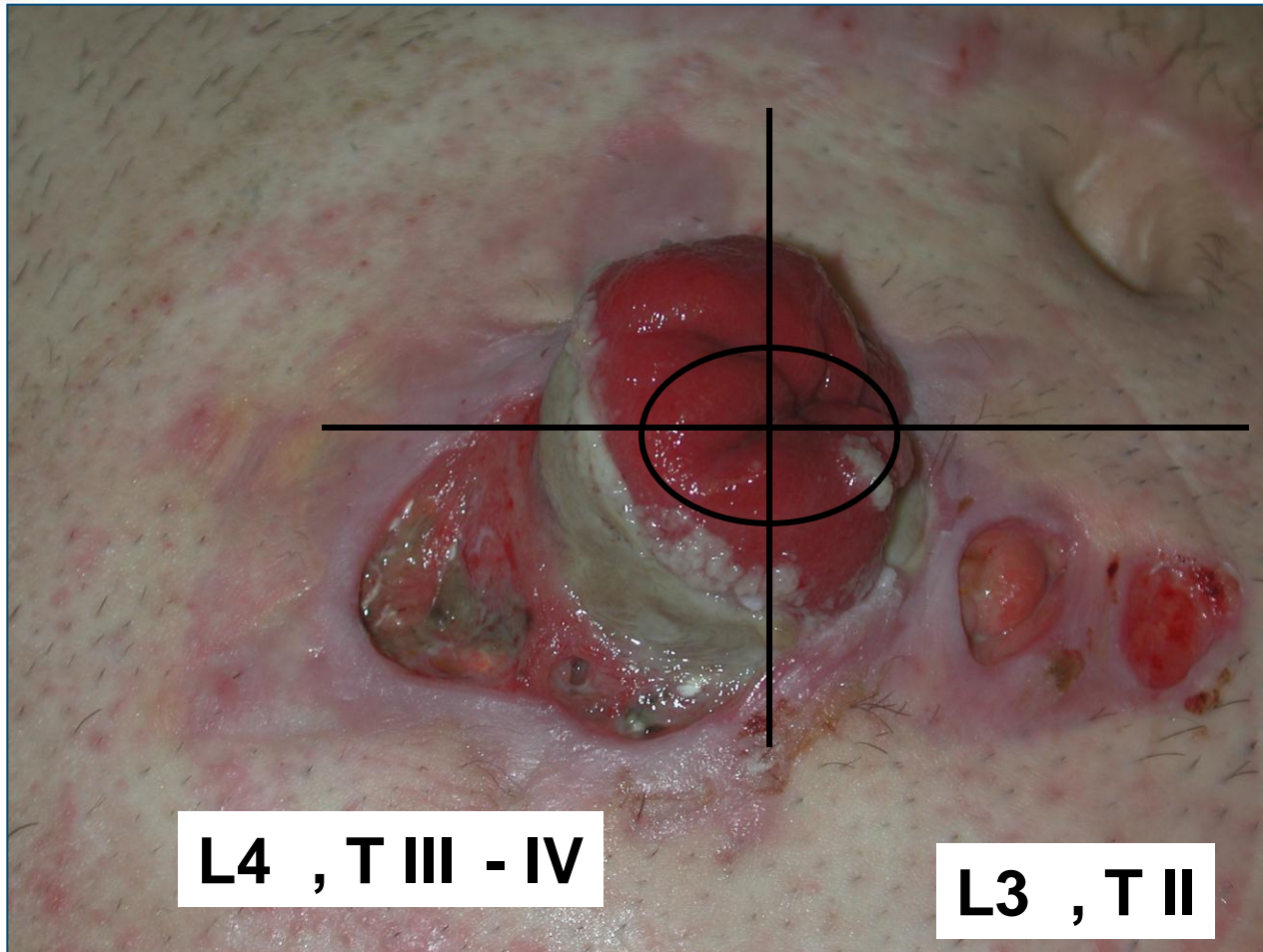
# ***IMAGE # 1***



**L1 , TV**



## ***IMAGE # 2***



# ***MODULE 4***



## ***SELF ASSESSMENT***

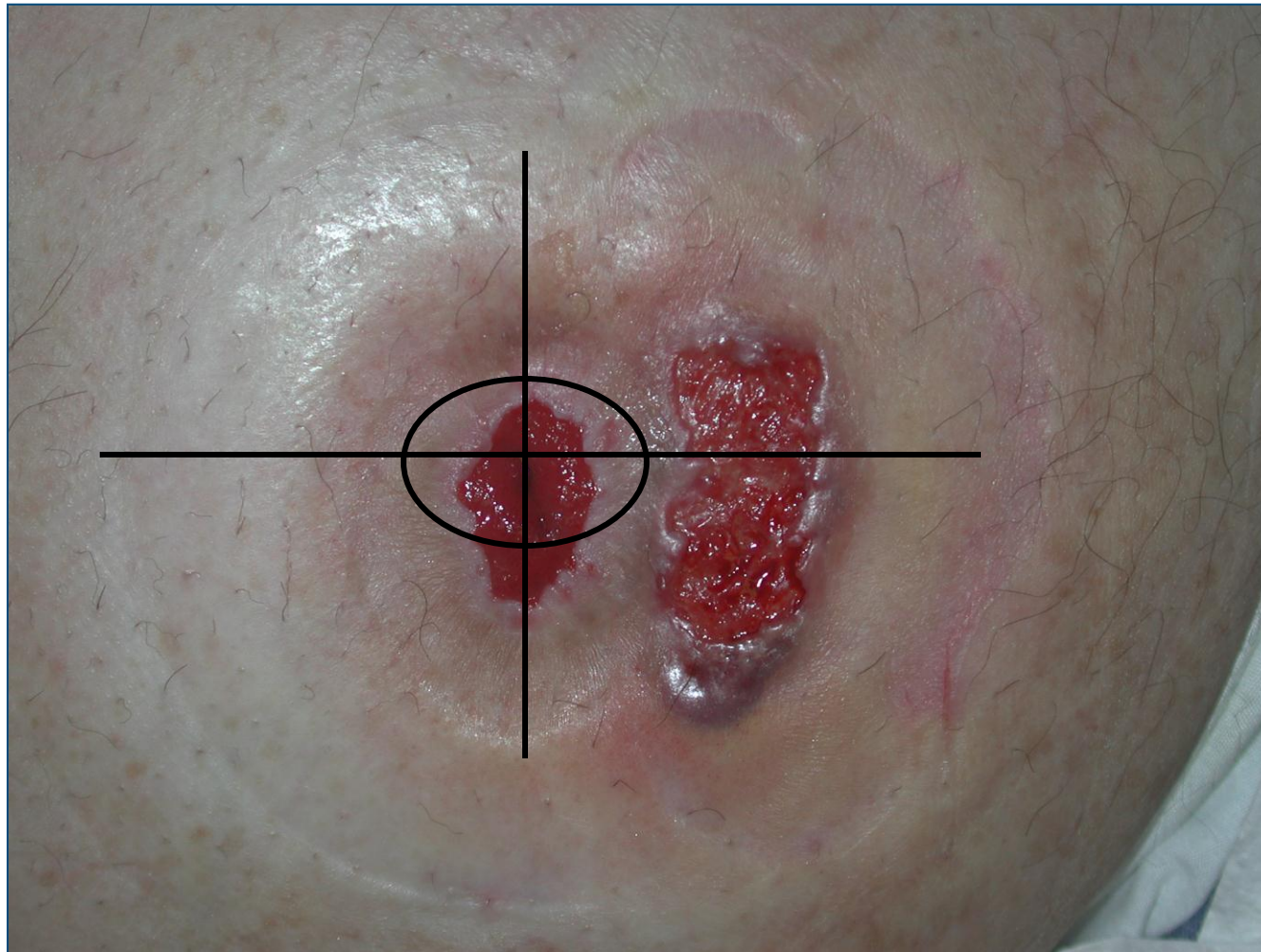
### **INSTRUCTIONS:**

**As you view each slide, evaluate the lesion by following the easy three step process outlined on the SACS™ Ruler**

- 1. Assess and classify**
- 2. Identify lesion location**
- 3. Document**



# LESION # 1



L \_\_, T \_\_

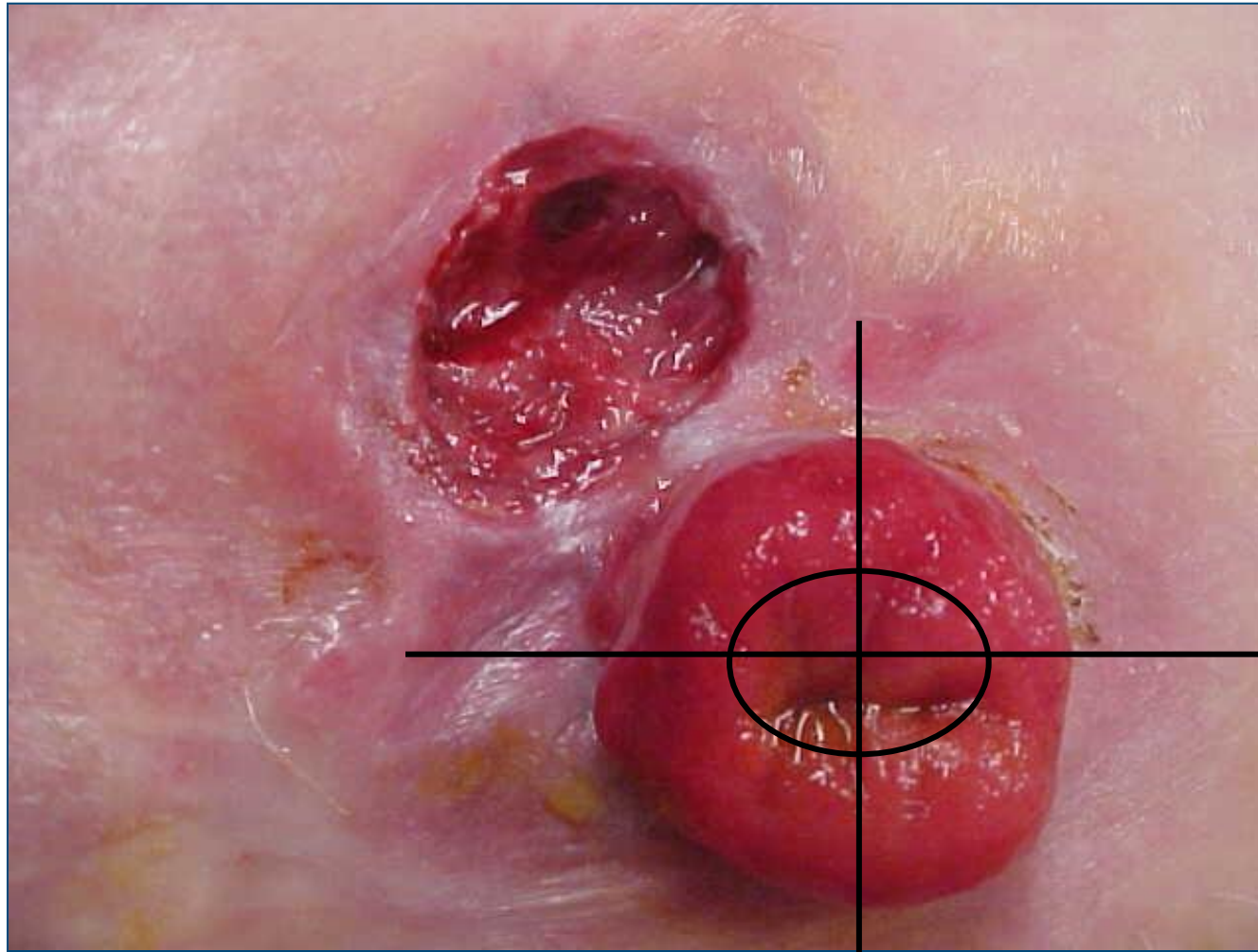
## ***LESION # 2***



**L \_\_ , T \_\_**



## ***LESION # 3***



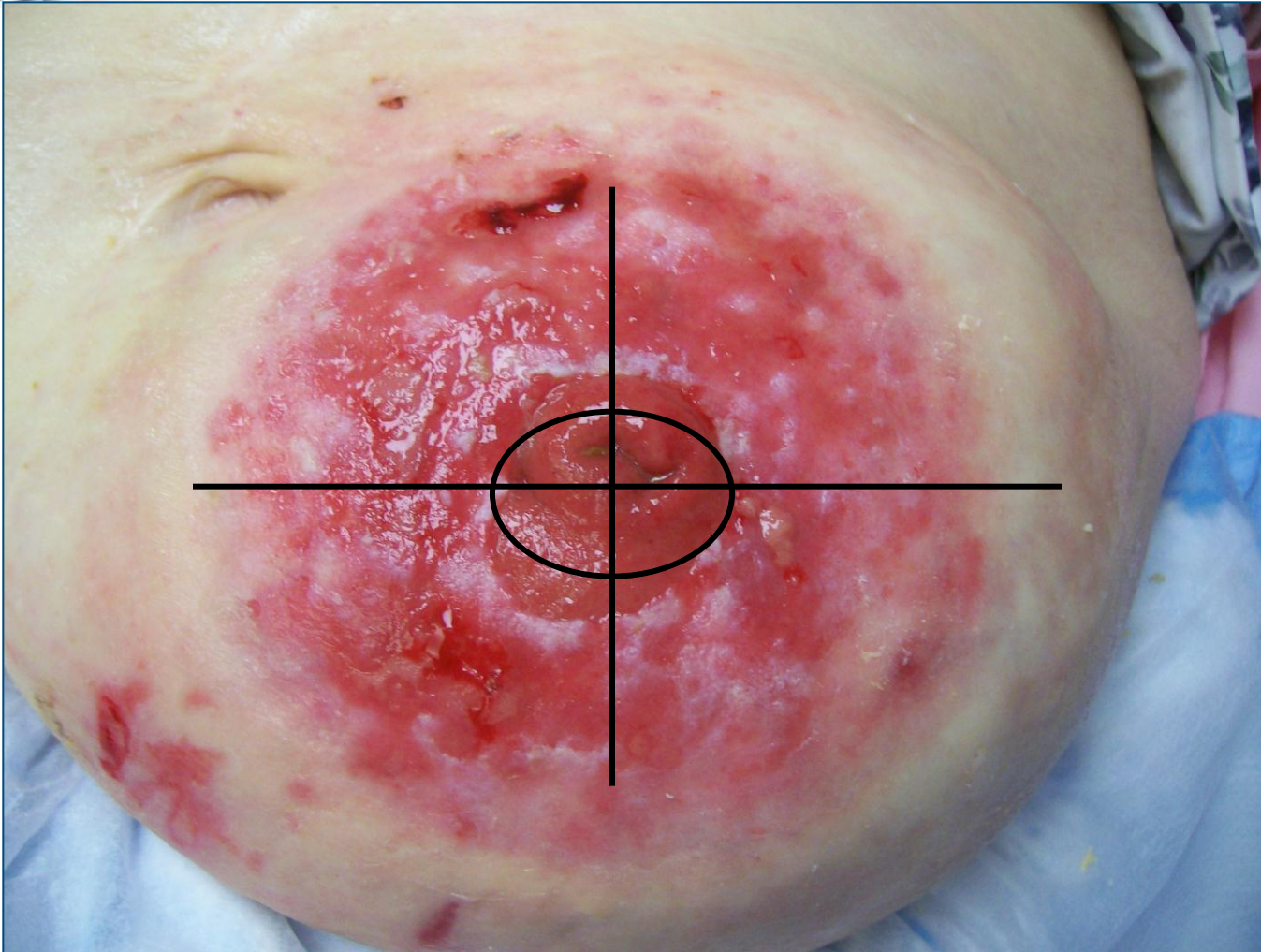
L \_\_, T \_\_

## LESION # 4



L \_\_, T \_\_

## ***LESION # 5***



L \_\_, T \_\_



# Summary



**Well done! You have completed the educational training module on how to accurately assess and classify a peristomal skin lesion using The SACS™ Instrument.**

## Implementing The SACS™ Instrument provides....

- Operational definitions for consistent interpretation of peristomal skin lesions
- A content validated measurement instrument to classify lesion type and location (CVI=0.94 out of 1)<sup>1</sup>
- An objective classification system to document the incidence of peristomal skin lesions



# Conclusion



**Thank you for participating in the SACS™ Instrument educational module. To access the tools needed to implement SACS™ in your practice, please see the instructions below.**

## **For Implementation Materials:**

- **Print Materials** = All materials are available in full color print form. Please contact your ConvaTec Sales Representative for print copies.

**Don't know who your representative is?**

**Call the ConvaTec Interaction Center (CIC) at 1-800-422-8811 for the name and contact information of your ConvaTec representative**