



I call shotgun!

Ahhh—the front seat, shotgun, the good spot, the privilege-to-sit-in and most coveted of all positions when riding in a car. Those are great words if you're the caller to stake your claim for the front seat, but not so great if you're the one stuck in the back seat.

In the world of health care, wound and skin care unfortunately never gets to ride shotgun. It seems like we always get the back seat unless there's a problem. Think back to your college days. Do you remember Wound and Skin Care 101 and the torture of memorizing all 2,000 wound care products on the market, the endless case studies and wound differentiation quizzes? No? Well neither do I. If your schooling was like mine, you learned about sterile dressing changes, wet-to-dry dressings, Montgomery straps, and if you were lucky, how to apply an ostomy bag.

Granted, I went to nursing school in the 1970s. But things haven't changed much. Wound care still gets the back seat when it comes to educational priorities. A survey by Ayello, Baranoski, and Salati of 692 registered nurses found that 70% considered their basic wound care education to be insufficient and fewer than 50% of new nurses believed they could consistently identify pressure ulcer stages. Another survey of nursing textbooks revealed students could be exposed to as few as 45 lines of text on pressure ulcers.

It's not just lack of nursing education, but also poor physician education. As

reported in a poster by Garcia and colleagues, only 8 of 50 medical residents scored more than 50% on a 20-question test measuring pressure ulcer knowledge, with a high score of 65% (range, 13.04% to 76.09% correct).

It's time for a change, and I'm excited to be a part of a new tool to help move wound and skin care education to the front seat: *Wound Care Advisor*, the official journal of the National Alliance of Wound Care (NAWC). With its "Don't just tell me, but show me" approach, the journal will feature plenty of photographs, step-by-step instructions, and video how-to's. If you're like me and prone to attention deficit, you're in luck. We'll keep things practical and to the point, with a "learn it today and do it tomorrow" mantra.

Another cutting-edge feature of the journal is the electronic-only format; this isn't a print journal. The no-paper format will help us declutter our lives and minimize our ecological footprint. Not to worry, though: With our print-on-demand feature, you can always print out individual articles or even the entire journal if you want.

In keeping with NAWC principles, *Wound Care Advisor* is geared toward all care settings and a multidisciplinary audience. This isn't just the NAWC journal; it's *your* journal. We need you to help us move wound care from the back seat to the front seat of the car by sharing your knowledge and passion for wound and skin care. Call or e-mail us

your case studies, best practices, tools, forms, wound photos, or even feedback about the journal.

I truly believe that together, you, I, NAWC, and *Wound Care Advisor* can move wound and skin care education to the front seat. I look forward to working with you on the ride to the coveted shotgun seat.



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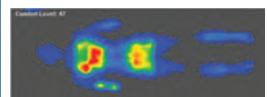
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Stretchable fabric sensing system to manage patient interface pressures and positioning.

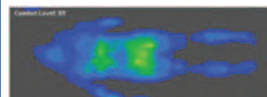


- Monitors patient interface pressures and positioning.
- Intelligently adapts support surfaces to optimize pressure distribution.
- Helps caregivers improve comfort and prevent pressure ulcers.

BEFORE



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